

CONFIR- MATIONS

2010



Official Business

Alaska State Legislature

House of Representatives


Office of the Chief Clerk

State Capitol, Room 216
Juneau, AK 99801-1182
Phone: (907) 465-3725
Fax: (907) 465-5334

MEMORANDUM

Date: January 27, 2010

To: Representative Ramras, Chair
Judiciary Committee

From: Suzi Lowell 
Chief Clerk

Subject: Chief Justice's Appointments

Speaker Chenault referred the following appointments by Chief Justice Walter L. Carpeneti to the Judiciary Committee:

Select Committee on Legislative Ethics
H. Conner Thomas (incumbent) of Nome
Gary Turner (incumbent) of Soldotna

The committee reports are attached for your use.

Attachments as noted



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MEMORANDUM

Date: 2010

To: All Committees

From: Suzi Lowell
Chief Clerk

Subject: Confirmation Committee Report (Signature Page) for Governor's
Appointments

The attached Confirmation Committee Report (signature page) should be used in conjunction with the Referral for Confirmation form for the Governor's appointments to boards and commissions requiring legislative confirmation. After a committee has reviewed the qualifications of the appointee(s), the Referral for Confirmation form(s) should be dated and attached to a signature page. Have members sign the signature page and return the confirmation packet to the Chief Clerk's office.

Please use a single signature page for multiple appointees if the names of all members signing the report are the same for each attached referral. This change allows members to sign once for multiple appointments.

Attached are several signature pages for your use. We used colored paper to make them easier to identify. If you anticipate needing more forms or need assistance, please call Nancy McMullen at 6809.

Note: A separate report, including the signatures, will be used for department commissioners.

Attachments

CONFIRMATION COMMITTEE REPORT

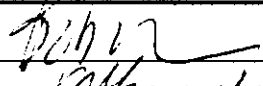
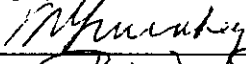
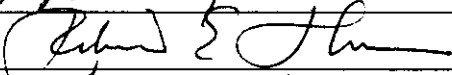
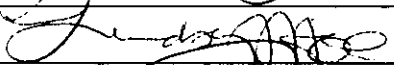
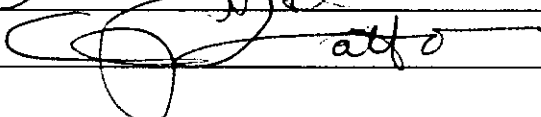


Action date: 2/17/10

In accordance with AS 24.60.130, the Judiciary Committee has reviewed the qualifications of the following Chief Justice's appointee and recommends that this name be forwarded to the House for ratification:

Select Committee on Legislative Ethics

H. Conner Thomas
(Incumbent)

This does not reflect intent by any of the members to vote for or against this individual during any further sessions for the purposes of ratification.

Signature:	Printed Last Name
	LYNN
	Brennan
	HERRON
	Holmes
	GATTO
Chair: 	RAMRAS
Chair: 	

Please return to the Chief Clerk's office.

CONFIRMATION COMMITTEE REPORT

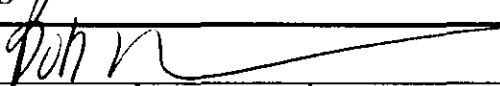
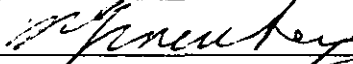


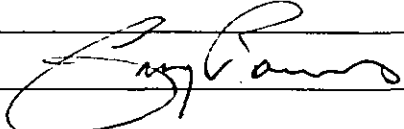
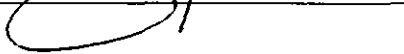
Action date: 2/17/10

In accordance with AS 24.60.130, the Judiciary Committee has reviewed the qualifications of the following Chief Justice's appointee and recommends that this name be forwarded to the House for ratification:

Select Committee on Legislative Ethics

Gary Turner
(Incumbent)

This does not reflect intent by any of the members to vote for or against this individual during any further sessions for the purposes of ratification.

Signature:	Printed Last Name
	Lynn
	Gatto
	Herron
	Holmes
Chair: 	RAMRAS
Chair: 	

Please return to the Chief Clerk's office.



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REFERRAL FOR CONFIRMATION

Date Referred: February 3, 2010

Committee: Judiciary

Board of Governors of the Alaska Bar Association

Donald McLean – Wasilla

Appointed: 3/1/2007

Reappointed: 3/1/2010 Term Expires: 3/1/2013

Action Date: 2/17/10
(Same date as on the accompanying signature page)

Note: Attach to a signature page and return to the Chief Clerk's office.



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REFERRAL FOR CONFIRMATION

Date Referred: February 3, 2010

Committee: Judiciary

Public Defender

Quinlan Steiner – Anchorage

Appointed: 10/14/2005

Reappointed: 10/9/2009 Term Expires: 10/14/2013

Action Date: 2/17/10
(Same date as on the accompanying signature page)

Note: Attach to a signature page and return to the Chief Clerk's office.



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REFERRAL FOR CONFIRMATION

Date Referred: February 3, 2010

Committee: Judiciary

Violent Crimes Compensation Board

Nora G. Barlow – Anchorage

Appointed: 3/1/2010 Term Expires: 3/1/2011

Action Date: 2/17/10
(Same date as on the accompanying signature page)

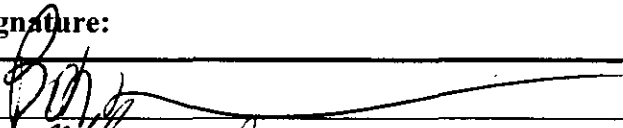
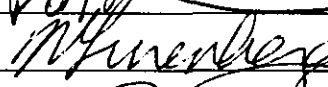
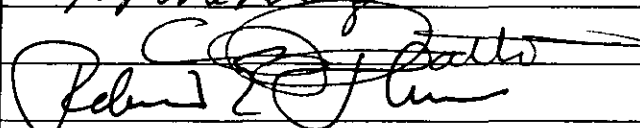

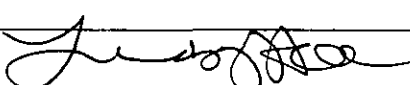
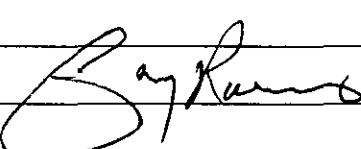
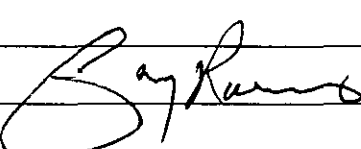
Note: Attach to a signature page and return to the Chief Clerk's office.

CONFIRMATION COMMITTEE REPORT

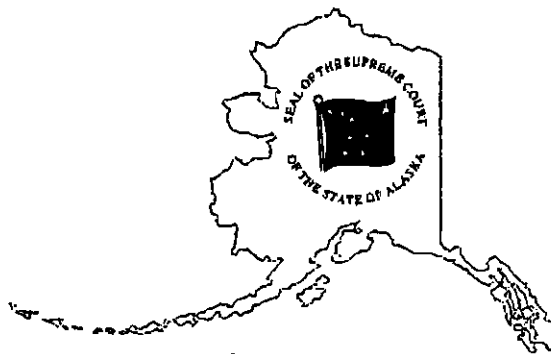
Action date: 2/17/10

The **Judiciary Committee** has reviewed the qualifications of the following Governor's appointee(s) as shown on the attached Referral for Confirmation forms(s) and recommends that the name(s) be forwarded to a joint session for consideration:

This does not reflect intent by any of the members to vote for or against this individual during any further sessions for the purposes of confirmation.

Signature:	Printed Last Name
	LYNN
	Gruenberg
	SATT
	HERRON
	Holmes
Co-Chair: 	RAMRAS
Co-Chair: 	

Please attach appointee Referral for Confirmation form(s) and return to the Chief Clerk's office.



Chambers of
Walter L. Carpeneti
Chief Justice

Supreme Court
State of Alaska

P.O. Box 114100
Juneau, Alaska
99811-4100

(907) 463-4771
Fax (907) 463-3475

January 22, 2010

The Honorable Gary Stevens
Senate President
State Capitol, Room 111
Juneau, Alaska 99801-1182

The Honorable Mike Chenault
Speaker of the House
State Capitol, Room 208
Juneau, Alaska 99801-1182

Dear President Stevens
and Speaker Chenault:

In my capacity as Chief Justice, and pursuant to AS 24.60.130(b)(3), I am re-nominating Gary J. Turner to serve another term as a public member of the Select Committee on Legislative Ethics.

Mr. Turner is the Director of Kenai Peninsula College, a campus of the University of Alaska, and is also a retired Air Force officer. For purposes of determining compliance with AS 24.60.130(c), Mr. Turner is a Republican.

Mr. Turner can be reached at (907) 262-2366 (home) or (907) 262-0315 (work). His mailing address is 215 River Watch Drive, Soldotna, Alaska 99669, and his e-mail address is Gary.Turner@uaa.alaska.edu. Please let me know if I can provide you with any other information on this matter.

Sincerely,

Walter L. Carpeneti

cc: Gary Turner
Joyce Anderson

GARY J. TURNER

215 River Watch Drive

Soldotna AK 99669

(907) 262-0315 (work), 262-0316 (fax)

(907) 262-2366 (home)

Gary.Turner@uaa.alaska.edu

Qualifications Summary

Education and public affairs professional with 30 years experience in communications management in NASA, U.S. Air Force, PR agency, corporate and university environments. Extensive experience in media relations, environmental risk communication, crisis and issues management and community relations.

Professional Experience

College Director/CEO

University of Alaska, Kenai Peninsula College, Soldotna, AK; June 2002-Present

- Serve as chief academic and administrative officer for 3,000 student college system. Lead 242 employees at four locations in Anchorage, Soldotna, Homer and Seward.

Senior Vice President & General Manager

Weber Shandwick Worldwide, Seattle, WA; August 2000 – October 2001

Program Manager, Public Affairs

NASA Marshall Space Flight Center, Ai Signal Research, Inc, Huntsville, AL; June 1996 - August 2000

Coordinator and Instructor, Continuing Education and Program Development

University of Alaska Southeast, Ketchikan AK; August 1995 - June 1996

State Executive Director

Alaskans for Drug-Free Youth, Ketchikan, AK; August 1994 - April 1995

Director, Public Affairs

Eielson Air Force Base, Alaska; April 1992 - August 1994

Director, Visitor Services Division

U.S. Air Force Academy, CO; May 1991 - April 1992

Academic Instructor

U.S. Air Force Academy, CO; May 1990 - May 1991

From 1979-1990, served in variety of public affairs roles at U.S. Air Force bases in Belgium, NORAD and U.S. Space Command in Colorado Springs, and Fairchild Air Force Base, Washington.

Education

- Master of Arts, Mass Communication, University of Denver, 1989.
- Bachelor of Science, Liberal Arts, University of the State of New York, 1983.

Professional Associations

- Member, Kenai River Sportfishing Association Board of Directors; 2003-present
- Member, Kenai River Guide Advisory Board; 2007-present
- Chair, Kenai River Guide Academy; 2005-present
- Retired Air Force Public Affairs officer; Top Secret clearance at retirement.



ALASKA PUBLIC OFFICES COMMISSION
 2010 FINANCIAL DISCLOSURE STATEMENT
 Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



FINANCIAL DISCLOSURE STATEMENT FOR:
 PUBLIC OFFICIALS, LEGISLATORS & CANDIDATES

EXECUTIVE BRANCH: Governor, Lt. Gov., commissioners, directors, special assistants and legislative liaisons; state boards and commissions; procurement and investment officers; city/borough officials; candidates.

JUDICIAL BRANCH: Justices, judges and magistrates.

LEGISLATIVE BRANCH: Legislators, legislative directors, Select Committee on Legislative Ethics.

FOR MORE INFORMATION, INSTRUCTIONS, BLANK FORMS, SAMPLE FORMS & QUESTIONS:

Visit APOC online at: doa.alaska.gov/apoc :

- To find detailed instructions and sample disclosures, under the heading "How do I..." click "Complete my initial, annual or final Public Official Financial Disclosure Statement"
- To find blank Financial Disclosure forms for public officials and legislators as well as a *Guide to Financial Disclosure in Alaska*, under the heading "Quick Links" click "APOC Forms"
- To find the laws and regulations that APOC administers and enforces, there is a link to "Statutes" or "APOC Statutes & Regulations" throughout the APOC Web site.

Contact APOC directly:

- ANCHORAGE: 2221 E. Northern Lights Blvd., Rm 128, Anchorage, AK 99508 / 907-276-4176 / Fax 907-276-7018
- JUNEAU: 240 Main St., Rm 500 / P.O. Box 110222, Juneau, AK 99811 / 907-465-4864 / Fax 907-465-4832
- TOLL-FREE: 800-478-4176 / Online contact info: <http://doa.alaska.gov/apoc/>

→ THIS IS A PUBLIC DOCUMENT ←

THIS REPORT IS A SWORN STATEMENT. YOUR SIGNATURE ON THE LAST PAGE CERTIFIES THAT THIS DISCLOSURE IS TRUE, CORRECT and COMPLETE.

NAME: Gary J. Turner

MAILING ADDRESS: 215 River Watch Dr. Soltotna AK 99669
Street address or P.O. box, city, zip code

CONTACT PHONE(S): 262-2366 (H) 262-0315 (W) Fax: 262-0316

E-MAIL: ingjt@uaa.alaska.edu

SPOUSE / DOMESTIC PARTNER: Marlene M. Turner

DEPENDENT CHILDREN: 0 NON-DEPENDENT CHILDREN LIVING WITH YOU: 0
Report number of children, including stepchildren, adoptive children. Legislative filers: List non-dependent children living with you

NAME NON-DEPENDENT CHILDREN LIVING WITH YOU: _____

ARRIVED
 DEC 15 2009

WHY ARE YOU FILING? OFFICE HOLDER or CANDIDATE

Office held or sought: Select Committee on Legislative Ethics

INITIAL STATEMENT: Due 30 days from appointment – for new public officials.

ANNUAL STATEMENT: Due by Jan 15 for incumbent officials.

FINAL STATEMENT: Due 90 days after leaving office – include data up until leaving office.

CANDIDATE STATEMENT: Due when filing declaration of candidacy

APOC-ANCH
 FINANC FAX ELE
 no date stamping

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT

Covers the reporting period Jan. 1, 2009- Dec. 31, 2009



SCHEDULE A: SOURCES OF INCOME OVER \$1,000

1. SALARIED EMPLOYMENT

NONE: check box →

Report each employer who paid you, your spouse, domestic partner or children covered by reporting requirements more than \$1,000. Include amount of income, dates of employment, terms of employment, amount of time worked.

Income means anything of value and covers all forms of compensation, including deferred income.

DESCRIBE THE WORK PERFORMED IN SUFFICIENT DETAIL

TO MAKE IT CLEAR TO A PERSON OF ORDINARY UNDERSTANDING.

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ 124,000

Full-time Part-time Seasonal Commission Project Hourly / Dates: Jan 1, - Dec 31, 2009

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: University of Alaska

Address: Po Box 755/40 Fairbanks AK 99775

DETAILED DESCRIPTION of SERVICES PROVIDED: _____

College Director, Kenai Peninsula College

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ 33,550

Full-time Part-time Seasonal Commission Project Hourly / Dates: Jan 1 - Dec 31, 2009

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: Kenai Peninsula Borough

Address: 144 N. Binkley St., Soldotna AK 99669

DETAILED DESCRIPTION of SERVICES PROVIDED: _____

Admin clerk in Capital Project office

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: _____

Address: _____

DETAILED DESCRIPTION of SERVICES PROVIDED: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners.</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE".</p>
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT

Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE A: SOURCES OF INCOME OVER \$1,000

2. SELF-EMPLOYMENT: NON-RETAIL

NONE: check box →

Disclose each client, customer or business that paid you, your spouse/domestic partner or child more than \$1,000. Self-employment includes sole proprietors, partnerships, limited liability companies, professional corporations. List each source of income over \$1,000 by name and amount. Exemptions: if the identity of the source of income is confidential by law, you may be excused from disclosing the source. To obtain an exemption, you must qualify under the law, you must file a written request, and you must receive an exemption from the commission. Exemption rules: Public officials, candidates: 2 AAC 50.100-102. Legislators: 2 AAC 50.775-780.

Income means anything of value and covers all forms of compensation, including deferred income.

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client / Customer name: _____

Client / customer address: _____

DETAILED DESCRIPTION of services provided: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client / customer name: _____

Client / customer address: _____

DETAILED DESCRIPTION of services provided: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client / customer name: _____

Client / customer address: _____

DETAILED DESCRIPTION of services provided: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners.</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU; CHECK "NONE"</p>
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**ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT**



Covers the reporting period Jan. 1, 2009– Dec. 31, 2009

SCHEDULE A: SOURCES OF INCOME OVER \$1,000

3. SELF-EMPLOYMENT – RETAIL

NONE: check box →

List each self-employment retail business that was a source of income of more than \$1,000. Individual retail clients/customers do not need to be disclosed with these exceptions. You must disclose (1) customers with a line of credit extending through two or more billing cycles, (2) customers with ongoing contracts to purchase goods or services, and (3) customers who are offered discounts not available to the general public.

Income means anything of value and covers all forms of compensation, including deferred income.

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client/customer name/address (if applicable): _____

DETAILED DESCRIPTION of services provided: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client/customer name/address (if applicable): _____

DETAILED DESCRIPTION of services provided: _____

4. RENTAL INCOME

NONE: check box →

OWNER:	TENANTS WHO PAID > \$1,000 (For property outside Alaska managed by agent, list AGENT instead of tenant)	AMOUNT
<input type="checkbox"/> Filer		
<input type="checkbox"/> Spouse or domestic partner		
<input type="checkbox"/> Child		
<input type="checkbox"/> Co-owner with others		

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"</p>
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DEC 15 2009



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT

Covers the reporting period Jan. 1, 2009– Dec. 31, 2009

SCHEDULE A: SOURCES OF INCOME OVER \$1,000



5. DIVIDENDS and INTEREST

NONE: check box →

Disclose source and amount of income over \$1,000 from dividends and interest. Include bank accounts, capital gains, money market accounts, certificates of deposit, Native corporation dividends, Permanent Fund dividends.

RECIPIENT	SOURCE	AMOUNT
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Child <input checked="" type="checkbox"/> Spouse/ partner	AK PED	2610
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		

6. OTHER INCOME

NONE: check box →

List source and amount of income over \$1,000 not listed elsewhere in this form, including sale of goods or property, pensions, IRA cash-outs, honorariums, alimony, child support, shared living expenses and government entitlements.

RECIPIENT	SOURCE	AMOUNT
<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner	Air Force retirement	21,000
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		

7. GIFTS WORTH MORE THAN \$250

NONE: check box →

Report gifts worth more than \$250 (including gifts from a single source with a cumulative value more than \$250) – *except* gifts from spouse, domestic partner, parent, child, sibling, grandparent, aunt, uncle, niece or nephew. Include travel expenses, discounts not available to the public, loans forgiven or loans paid by a third party. Legislators must submit more detailed disclosure reports to the Legislative Ethics Committee.

RECIPIENT	DESCRIPTION	SOURCE	VALUE
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE".
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT

Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE B

BUSINESS INTERESTS

NONE: check box →

Report business interests even if they were NOT a source of income, including businesses in which you/family:

- Served as stockholder, owner, officer, director, partner, proprietor, employee or held an interest.
- Had ownership interests of more than \$1,000 in a publicly traded corporation.
- Had any other ownership interest in a business, including shares in non-publicly traded corporations, sole proprietorships, limited liability companies. Include options to buy.
- Include non-profit organizations, corporations, businesses, associations, trade groups.

If the business was a source of income over \$1,000, it must also be reported in Schedule A.

Filer / Spouse/domestic partner / Child / Position/Type of interest: Board of Directors

Business name: Kenai River Sportfishing Association

Business address: Po Box 1228 Soldotna AK 99669

DETAILED DESCRIPTION of business activity: Non profit sport fishing organization

Filer / Spouse/domestic partner / Child / Position/Type of interest: Board member

Business name: Kenai River Guide Advisory Board

Business address: Kenai River Center, Funny River Rd, Soldotna AK 99669

DETAILED DESCRIPTION of business activity: Advise Kenai River special management Area on guide industry issues

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: _____

Business address: _____

DETAILED DESCRIPTION of business activity: _____

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: _____

Business address: _____

DETAILED DESCRIPTION of business activity: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"</p>
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ALASKA PUBLIC OFFICES COMMISSION
 2010 FINANCIAL DISCLOSURE STATEMENT
 Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE C

REAL PROPERTY INTERESTS

NONE: check box →

Include your home, a rent-to-own home, rental property, vacant property, recreational property, options to buy, business property and real estate interests held in a limited liability company, limited partnership or trust. Include property owned or sold during the reporting period. *If property is jointly owned, check all boxes that apply.*

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: 215 River Watch Dr

City or borough / State: Seldotna AK 99669

Ownership interest: Home owner

(Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: Lot 8, Block 3, Mooring by the River, Plat 84-160

City or borough / State: Seldotna AK 99669

Ownership interest: Vacant lot - own

(Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: Lot 13, Block 1, Mooring by the River, Plat 84-160

City or borough / State: Seldotna AK 99669

Ownership interest: Vacant lot - own

(Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: _____

City or borough / State: _____

Ownership interest: _____

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: _____

City or borough / State: _____

Ownership interest: _____

(Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p>IF YOU HAVE NOTHING TO REPORT or, A SECTION DOES NOT APPLY TO YOU; CHECK "NONE"</p>
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ALASKA PUBLIC OFFICES COMMISSION
 2010 FINANCIAL DISCLOSURE STATEMENT
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SCHEDULE D

BENEFICIAL INTERESTS: TRUSTS & RETIREMENT ACCOUNTS over \$1,000 / NONE:

Report each beneficial interest in a trust or retirement account that exceeded \$1,000 during the reporting period. Report stocks, bonds, mutual funds, cash accounts, CDs, deferred compensation plans, profit-sharing accounts, employee benefit accounts, retirement accounts (such as IRA, 401K, SEP or Keogh) trust funds (including blind trusts) and limited partnerships. "Managed by" means the filer, employer, business, investment entity or name of the company that manages the account. Identify individual investments if you or family members manage or personally control the investments. "Identify fund or companies" means the individual companies or accounts where you are the manager and you control the investments; if a mutual fund, investment company or other third party entity manages and controls the investments, list the name or type of fund where the assets are held. You do NOT need to list the dollar value of the assets, but you must identify the assets by owner, manager and name.

ASSETS - OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: 100

ASSETS - MANAGED BY: Fidelity Investments

ASSETS - IDENTIFY FUND or COMPANIES: Fidelity Freedom 2020

ASSETS - OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: 100

ASSETS - MANAGED BY: Alaska PERS

ASSETS - IDENTIFY FUND or COMPANIES: Univ. of Alaska retirement

ASSETS - OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: 100

ASSETS - MANAGED BY: Alaska PERS

ASSETS - IDENTIFY FUND or COMPANIES: Global Balanced, Braudes TRST, T. Rowe Price SmallCap, S&P 500 Stock Index, Sentinel Sustainable, Money Market Fund

ASSETS - OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS - MANAGED BY: _____

ASSETS - IDENTIFY FUND or COMPANIES: _____

ASSETS - OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS - MANAGED BY: _____

ASSETS - IDENTIFY FUND or COMPANIES: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners.</p>	<p>IF YOU HAVE NOTHING TO REPORT OR A SECTION DOES NOT APPLY TO YOU, CHECK "NONE".</p>
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ALASKA PUBLIC OFFICES COMMISSION
 2010 FINANCIAL DISCLOSURE STATEMENT
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SCHEDULE E

1. LOANS, LOAN GUARANTEES & DEBTS OVER \$1,000

NONE: check box →

Report each creditor or lender to whom more than \$1,000 was owed during the reporting period. Report guarantor of each loan. List financial obligations, including mortgages on property owned or sold during the reporting period; loans that have been guaranteed; delinquent taxes; alimony; child support payments; medical bills; boat and vehicle loans; business and personal loans; escrows; student loans; signature loans and promissory notes. Loans include secured, unsecured and contingent loans. Do NOT list credit card obligations or revolving charge accounts.

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: First National Bank of Alaska

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: USA A

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

2. FOR LEGISLATIVE BRANCH FILERS ONLY

NONE: check box →

Legislative branch filers must report additional details: original amount of the obligation, the current balance owed, interest rate, length of the loan and whether a written agreement exists for a creditor or lender who:

- Lobbies or hired lobbyists
- Had contracts or sought contracts worth more than \$10,000 with any state agency
- Was a municipal or local government entity
- Was affected financially – in an amount exceeding \$1,000 – by an act of the legislature or state agency decision, including actions affecting professional or occupational licenses; natural resource permits or quotas; assessments; tax rates; health, safety or environmental standards; insurance or business practices.

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER or CREDITOR / Name: _____

Address: _____

Original loan: \$ _____ Balance owed: \$ _____ Interest rate: _____ %

Term: _____ years _____ months / WRITTEN LOAN AGREEMENT? Yes / No

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
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SCHEDULE F

1. LEASES: GOVERNMENT CONTRACTS & LEASES

NONE: check box →

List all contracts, bids and offers to contract with the state or any state or municipal agency or entity. Report contract interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company or through a corporation in which filer or family members held a controlling interest.

CONTRACTOR: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **CONTRACT ID (name/number):** _____

CONTRACTING AGENCY: _____

CONTRACT DESCRIPTION: _____

CONTRACTOR: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **CONTRACT ID (name/number):** _____

CONTRACTING AGENCY: _____

CONTRACT DESCRIPTION: _____

2. LEASES: NATURAL RESOURCE LEASES

NONE: check box →

List natural resource leases – including mineral, timber, oil and gas leases – held, bid or offered during the reporting period. Report lease interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company; or corporation in which you or family (individually or together) held controlling interest.

LEASEHOLDER: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **LEASE ID (name/number):** _____

LEASE DESCRIPTION: _____

LEASEHOLDER: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **LEASE ID (name/number):** _____

LEASE DESCRIPTION: _____

<p align="center">GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p align="center">CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p align="center">IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE".</p>
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE G

1. CLOSE ECONOMIC ASSOCIATIONS

NONE: check box →

EXEMPT: Municipal and local officials are exempt from reporting close economic associations. Members of state boards and commissions are exempt from reporting close economic associations. Local officials and state board/commission members do NOT have to complete this section. Check the box for NONE.

STATE PUBLIC OFFICIALS: Disclose financial relations with legislators, other public officials and lobbyists.

LEGISLATIVE BRANCH: Disclose financial relations with public officials, lobbyists, other legislators, and legislative employees. Report close economic association detailed information to the Legislative Ethics Committee.

CLOSE ECONOMIC ASSOCIATION means a financial relationship between public officials, legislators and lobbyists, including shared interests in a business, property, association, partnership, corporation or LLC.

CHANGES: Report new close economic associations within 60 days.

PERSON DISCLOSING ECONOMIC ASSOCIATION: Filer / Spouse/domestic partner / Child

PERSON with WHOM ASSOCIATION EXISTS: _____

DESCRIPTION of ECONOMIC ASSOCIATION: _____

PERSON DISCLOSING ECONOMIC ASSOCIATION: Filer / Spouse/domestic partner / Child

PERSON with WHOM ASSOCIATION EXISTS: _____

DESCRIPTION of ECONOMIC ASSOCIATION: _____

2. FILERS WITH A LOBBYIST SPOUSE or DOMESTIC PARTNER

NONE:

EXEMPT: Local officials and members of state boards and commissions are EXEMPT. Check NONE.

STATE PUBLIC OFFICIALS with a lobbyist spouse or domestic partner: Report names and addresses of each employer of the lobbyist and the total monetary value received from each of the lobbyist's employers.

LEGISLATIVE BRANCH filers with a lobbyist spouse or domestic partner: Disclose employer of lobbyist and compensation, and report details to the Legislative Ethics Committee.

CHANGES: Report changes in lobbyist's employer within 48 hours of the change.

LOBBYIST'S EMPLOYER: NAME & ADDRESS	COMPENSATION

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. <i>For example, check multiple boxes for joint property owners</i>	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



CERTIFICATION

I certify under penalty of perjury that the foregoing is true and the information in this disclosure 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.

SIGNATURE Gary J. Turner
 If you are filing online, you must have an Electronic Filing Agreement with APOC to use an electronic signature.

Gary J. Turner 12/12/09 Home
NAME of FILER **DATE & PLACE SIGNED / FILED**

All officials and candidates who are required to file disclosure statements are solely responsible for filing complete, accurate and truthful statements by the deadlines.

WHERE TO FILE THIS STATEMENT

STATE OFFICIALS: File initial, annual and final statements with the Alaska Public Offices Commission.

STATE CANDIDATES: File with the Division of Elections along with Declaration of Candidacy.

BOROUGH / MUNICIPAL / CITY OFFICIALS and CANDIDATES: File with city or borough clerk where you hold or seek office.

FILE ELECTRONICALLY to APOC: doa.apoc.reports@alaska.gov

THIS IS A PUBLIC DOCUMENT

NOTE: Public officials who are required to file this disclosure statement may have additional obligations to disclose conflicts of interest or potential conflicts under state executive, legislative or judicial ethics rules or personnel rules. Legislators who are required to file this disclosure statement have additional disclosure and reporting requirements imposed by the Select Committee on Legislative Ethics. Local officials may also be governed by local ethics ordinances or personnel rules.

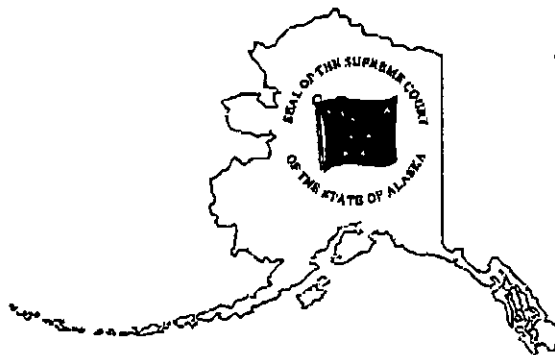
Disclosure forms, guidelines, laws and regulations are online: www.apoc.alaska.gov or from APOC offices

ALASKA PUBLIC OFFICES COMMISSION

ANCHORAGE OFFICE: 2221 E. Northern Lights Blvd – Rm 128 Anchorage, AK 99508-4149 907-276-4176 / Toll-free 800-478-4176 Fax 907-276-7018	JUNEAU OFFICE: 240 Main St. – Rm 500 Mail: P.O. Box 110222 Juneau, AK 99811-0222 907-465-4864 / Fax 907-465-4832
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E-mail APOC: doa.apoc@alaska.gov
 File electronic disclosure statements to: doa.apoc.reports@alaska.gov

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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Chambers of
Walter L. Carpeneti
Chief Justice

Supreme Court
State of Alaska

P.O. Box 114100
Juneau, Alaska
99811-4100

(907) 463-4771
Fax (907) 463-3475

January 22, 2010

The Honorable Gary Stevens
Senate President
State Capitol, Room 111
Juneau, Alaska 99801-1182

The Honorable Mike Chenault
Speaker of the House
State Capitol, Room 208
Juneau, Alaska 99801-1182

Dear President Stevens
and Speaker Chenault:

In my capacity as Chief Justice, and pursuant to AS 24.60.130(b)(3), I am re-nominating H. Conner Thomas to serve another term as a public member of the Select Committee on Legislative Ethics.

Mr. Thomas is an associate and partner in a small general practice law firm, Lewis & Thomas, P.C. For purposes of determining compliance with AS 24.60.130(c), Mr. Thomas is a Democrat.

Mr. Thomas can be reached at (907) 443-5226. His mailing address is P.O. Box 865, Nome, Alaska, 99762, and his e-mail address is connernomelaw@gci.net. Please let me know if I can provide you with any other information on this matter.

Sincerely,

Walter L. Carpeneti

cc: H. Conner Thomas
Joyce Anderson

H. Conner Thomas
P.O. Box 865
Nome, Alaska 99762
907-443-5226/fax: 907-443-5098
e-mail: connernomelaw@gci.net

EDUCATION

University of Louisville, School of Law, Louisville, Kentucky, J.D. (1977)
University of Kentucky, Lexington, Kentucky, B.A. Economics (1973)

EMPLOYMENT

Lewis & Thomas, P.C., August 1986 to present - Nome, Alaska
Formerly Larson Timbers & Thomas P.C.
Associate and partner in a small general practice law firm

State of Alaska, Public Defender Agency, May 1983 to August 1986 - Nome, AK
Representing indigent criminal defendants

State of Alaska Court System – Magistrate, September 1982 to May 1983 - Nome, AK
Arraign criminal defendants, preside over misdemeanor trials, and preside as master in child in need of aid and juvenile delinquency cases

Alaska Legal Services Corporation, October 1979 to September 1982- Nome, AK
Staff and supervising attorney for law office representing indigent clients in civil cases

U.S. Department of Interior, May 1979 to October 1979 – Anchorage, AK
Land adjudicator

VISTA Volunteer, October 1977 to January 1979 – Fairbanks and Nome, AK
Staff attorney with Protection and Advocacy for developmentally disabled - Fairbanks
Staff attorney with Alaska Legal Services Corporation- Nome

ORGANIZATIONS

Legislative Ethics Committee, Public Member – January 1999 to present

Nome Kennel Club, President, Board of Directors – December 1992 to present

Alaska Civil Liberties Union, Board of Directors – April 1994 to October 1997

Citizen Review Committee, Department of Health & Social Services – October 1985 to January 1987



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
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**FINANCIAL DISCLOSURE STATEMENT FOR:
PUBLIC OFFICIALS, LEGISLATORS & CANDIDATES**

EXECUTIVE BRANCH: Governor, Lt. Gov., commissioners, directors, special assistants and legislative liaisons; state boards and commissions; procurement and investment officers; city/borough officials; candidates.

JUDICIAL BRANCH: Justices, judges and magistrates.

LEGISLATIVE BRANCH: Legislators, legislative directors, Select Committee on Legislative Ethics.

FOR MORE INFORMATION, INSTRUCTIONS, BLANK FORMS, SAMPLE FORMS & QUESTIONS: Visit APOC online at: doa.alaska.gov/apoc:

- To find detailed instructions and sample disclosures, under the heading "How do I..." click "Complete my initial, annual or final Public Official Financial Disclosure Statement"
- To find blank Financial Disclosure forms for public officials and legislators, under the heading "Quick Links" click "APOC Forms"
- To find the laws and regulations that APOC administers and enforces, there is a link to "Statutes" or "APOC Statutes & Regulations" throughout the APOC Web site.

Contact APOC directly:

- ANCHORAGE: 2221 E. Northern Lights Blvd., Rm 128, Anchorage, AK 99508 / 907-276-4176 / Fax 907-276-7018
- JUNEAU: 240 Main St., Rm 500 / P.O. Box 110222, Juneau, AK 99811 / 907-465-4864 / Fax 907-465-4832
- TOLL-FREE: 800-478-4176 / Online contact info: <http://doa.alaska.gov/apoc/>

THIS IS A PUBLIC DOCUMENT - DO NOT INCLUDE CONFIDENTIAL INFORMATION
(i.e., SOCIAL SECURITY NUMBERS, ACCOUNT NUMBERS)

THIS REPORT IS A SWORN STATEMENT. YOUR SIGNATURE ON THE LAST PAGE CERTIFIES THAT THIS DISCLOSURE IS TRUE, CORRECT and COMPLETE.

NAME: H. Conner Thomas

MAILING ADDRESS: P.O. Box 865 Nome, Alaska 99762
Street address or P.O. Box, city, zip code

CONTACT PHONE(S): 907-443-5226
443-5098

E-MAIL: connernomelaw@gci.net

SPOUSE / DOMESTIC PARTNER: Margaret A. Thomas

DEPENDENT CHILDREN: one NON-DEPENDENT CHILDREN LIVING WITH YOU: none
Report number of children, including stepchildren, adoptive children. Legislative filers: List non-dependent children living with you.

NAME NON-DEPENDENT CHILDREN LIVING WITH YOU: _____

ARRIVED
JAN 13
12 2010 MAY
APOC-ANCH
FOR INFO FAX ELB
1-11-10

WHY ARE YOU FILING? OFFICE HOLDER or CANDIDATE

Office held or sought: Public Member Select Committee Legislative Ethics

INITIAL STATEMENT: Due 30 days from appointment for new public officials (and annually thereafter).

ANNUAL STATEMENT: Due by January 11, 2010 – for incumbent officials.

FINAL STATEMENT: Due 90 days after leaving office – From _____ through _____
(Include all information not reported on a previously filed statement through your last day of office.)

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.

CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners

IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT



Covers the reporting period Jan. 1, 2009– Dec. 31, 2009

CANDIDATE STATEMENT: Due when filing declaration of candidacy

SCHEDULE A: SOURCES OF INCOME OVER \$1,000

1. SALARIED EMPLOYMENT

NONE: check box →

Report each employer who paid you, your spouse, domestic partner or children covered by reporting requirements more than \$1,000. Include amount of income, dates of employment, terms of employment, amount of time worked. Income means anything of value and covers all forms of compensation, including deferred income.

DESCRIBE THE WORK PERFORMED IN SUFFICIENT DETAIL
TO MAKE IT CLEAR TO A PERSON OF ORDINARY UNDERSTANDING.

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ \$33,240.9

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: Nome Public Schools

Address: P.O. Box 131, Nome, Alaska 99762

DETAILED DESCRIPTION of SERVICES PROVIDED: Title I paraprofessional

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: _____

Address: _____

DETAILED DESCRIPTION of SERVICES PROVIDED: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Employer: _____

Address: _____

DETAILED DESCRIPTION of SERVICES PROVIDED: _____

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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JAN 13 2010



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
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SCHEDULE A: SOURCES OF INCOME OVER \$1,000

2. SELF-EMPLOYMENT: NON-RETAIL

NONE: check box →

Disclose each client, customer or business that paid you, your spouse/domestic partner or child more than \$1,000. Self-employment includes sole proprietors, partnerships, limited liability companies, professional corporations. List each source of income over \$1,000 by name and amount. Exemptions: if the identity of the source of income is confidential by law, you may be excused from disclosing the source. To obtain an exemption, you must qualify under the law, you must file a written request, and you must receive an exemption from the commission. Exemption rules: Public officials, candidates: 2 AAC 50.100-102. Legislators: 2 AAC 50.775-780.
Income means anything of value and covers all forms of compensation, including deferred income.

EARNED BY Filer / Spouse/domestic partner / Child / Total income: \$ 108,000.00

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: Lewis & Thomas, P.C.

Client / Customer name: Attachment A

Client / customer address: Attachment A

DETAILED DESCRIPTION of services provided: Legal Services

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client / customer name: _____

Client / customer address: _____

DETAILED DESCRIPTION of services provided: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client / customer name: _____

Client / customer address: _____

DETAILED DESCRIPTION of services provided: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"</p>
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT



Covers the reporting period Jan. 1, 2009– Dec. 31, 2009

SCHEDULE A: SOURCES OF INCOME OVER \$1,000

3. SELF-EMPLOYMENT – RETAIL

NONE: check box →

List each self-employment retail business that was a source of income of more than \$1,000. Individual retail clients/customers do *not* need to be disclosed with these *exceptions*. You must disclose (1) customers with a line of credit extending through two or more billing cycles, (2) customers with ongoing contracts to purchase goods or services, and (3) customers who are offered discounts not available to the general public.

Income means anything of value and covers all forms of compensation, including deferred income.

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client/customer name/address (if applicable): _____

DETAILED DESCRIPTION of services provided: _____

EARNED BY: Filer / Spouse/domestic partner / Child / Total income: \$ _____

Full-time Part-time Seasonal Commission Project Hourly / Dates: _____

If work is not full-time, specify amount of time worked (months/days/hours): _____

Business name: _____

Client/customer name/address (if applicable): _____

DETAILED DESCRIPTION of services provided: _____

4. RENTAL INCOME

NONE: check box →

OWNER:	TENANTS WHO PAID > \$1,000	AMOUNT
	(For property outside Alaska managed by agent, list AGENT instead of tenant)	
<input type="checkbox"/> Filer		
<input type="checkbox"/> Spouse or domestic partner		
<input type="checkbox"/> Child		
<input type="checkbox"/> Co-owner with others		

SCHEDULE A: SOURCES OF INCOME OVER \$1,000

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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JAN 18 2010



**ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT**



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5. DIVIDENDS and INTEREST

NONE: check box →

Disclose source and amount of income over \$1,000 from dividends and interest. Include bank accounts, capital gains, money market accounts, certificates of deposit, Native corporation dividends, Permanent Fund dividends.

RECIPIENT	SOURCE	AMOUNT
x Filer <input type="checkbox"/> Child x Spouse/ partner	Wells Fargo Securities Brokerage Account – See Attachments B&D	\$7,302.36
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner	Fidelity Retirement – See Attachment C	\$1,414.75
x Filer x Child x <input type="checkbox"/> Spouse/ partner	Alaska Permanent Fund Dividends	\$3,915.00
x Filer x Child x Spouse/ partner	Savings Account Interest	\$5.57
X Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner	PERS Account – See Attachment F	\$1,162.13
<input type="checkbox"/> Filer <input type="checkbox"/> Child X Spouse/ partner	New York Life – See Attachment G	\$1,547.13

6. OTHER INCOME

NONE: check box →

List source and amount of income over \$1,000 not listed elsewhere in this form, including sale of goods or property, pensions, IRA cash-outs, honorariums, alimony, child support, shared living expenses and government entitlements.

RECIPIENT	SOURCE	AMOUNT
x Filer <input type="checkbox"/> Child x Spouse/ partner	Wells Fargo Securities Account (Stock Sales) – Attachment B	\$32,543.91
X Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner	Wells Fargo IRA – Attachment D	\$2,124.36
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner		

7. GIFTS WORTH MORE THAN \$250

NONE: check box →

Report gifts worth more than \$250 (including gifts from a single source with a cumulative value more than \$250) – *except* gifts from spouse, domestic partner, parent, child, sibling, grandparent, aunt, uncle, niece or nephew. Include travel expenses, discounts not available to the public, loans forgiven or loans paid by a third party. Legislators must submit more detailed disclosure reports to the Legislative Ethics Committee.

RECIPIENT	DESCRIPTION	SOURCE	VALUE
<input type="checkbox"/> Filer <input type="checkbox"/> Child x Spouse/ partner	Cash	Henry Landsberger	\$5,329.01
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse/ partner			

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE B

BUSINESS INTERESTS

NONE: check box →

Report business interests even if they were **NOT** a source of income, including businesses in which you/family:

- Served as stockholder, owner, officer, director, partner, proprietor, employee or held an interest.
- Had ownership interests of more than \$1,000 in a publicly traded corporation.
- Had any other ownership interest in a business, including shares in non-publicly traded corporations, sole proprietorships, limited liability companies. Include options to buy.
- Include non-profit organizations, corporations, businesses, associations, trade groups.

If the business was a source of income over \$1,000, it must also be reported in Schedule A.

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: Lewis & Thomas, P.C.

Business address: P.O. Box 61, Nome, Alaska 99762

DETAILED DESCRIPTION of business activity: Law Practice

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: Wells Fargo Investment Account – See Attachment B

Business address: _____

DETAILED DESCRIPTION of business activity: _____

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: _____

Business address: _____

DETAILED DESCRIPTION of business activity: _____

Filer / Spouse/domestic partner / Child / Position/Type of interest: _____

Business name: _____

Business address: _____

DETAILED DESCRIPTION of business activity: _____

SCHEDULE C

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. <small>For example, check multiple boxes for joint property owners</small>	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
 2010 FINANCIAL DISCLOSURE STATEMENT
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REAL PROPERTY INTERESTS

NONE: check box →

Include your home, a rent-to-own home, rental property, vacant property, recreational property, options to buy, business property and real estate interests held in a limited liability company, limited partnership or trust. Include property owned or sold during the reporting period. *If property is jointly owned, check all boxes that apply.*

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: Lots, 13B, 14B, and 15B, First Addition to Banner Creek Subdivision, Cape Nome, Recording District

City or borough / State: _____

Ownership interest: Owner
 (Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: Lots 5,6 Melsing Creek Subdivision, Second Judicial District, Cape Nome, Recording District

City or borough / State: _____

Ownership interest: _____
 (Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: _____

City or borough / State: _____

Ownership interest: _____
 (Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: _____

City or borough / State: _____

Ownership interest: _____

OWNER(S): Filer / Spouse/domestic partner / Child / Other co-owner: _____

Street address or legal description: _____

City or borough / State: _____

Ownership interest: _____
 (Such as home owner, option to buy, owned through business entity or trust, leasehold, partnership)

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE D

BENEFICIAL INTERESTS: TRUSTS & RETIREMENT ACCOUNTS over \$1,000 / NONE:

Report each beneficial interest in a trust or retirement account that exceeded \$1,000 during the reporting period. Report stocks, bonds, mutual funds, cash accounts, CDs, deferred compensation plans, profit-sharing accounts, employee benefit accounts, retirement accounts (such as IRA, 401K, SEP or Keogh) trust funds (including blind trusts) and limited partnerships. "Managed by" means the filer, employer, business, investment entity or name of the company that manages the account. Identify individual investments if you or family members manage or personally control the investments. "Identify fund or companies" means the individual companies or accounts where you are the manager and you control the investments; if a mutual fund, investment company or other third party entity manages and controls the investments, list the name or type of fund where the assets are held. You do NOT need to list the dollar value of the assets, but you must identify the assets by owner, manager and name.

ASSETS – OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: 100%

ASSETS – MANAGED BY: Fidelity (401K Plan); Wells Fargo (IRA); State of Alaska SBS & PERS;

ASSETS – IDENTIFY FUND or COMPANIES: See Attachments C, D, E, F

ASSETS – OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS – MANAGED BY: New York Life Annuity; Sunlife Canada Annuity; Wells Fargo (IRA); State of Alaska PERS;

ASSETS – IDENTIFY FUND or COMPANIES: See Attachments G, H, I, J

ASSETS – OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS – MANAGED BY: T. Rowe Price (529 College Savings Account)

ASSETS – IDENTIFY FUND or COMPANIES: See Attachment K

ASSETS – OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS – MANAGED BY: _____

ASSETS – IDENTIFY FUND or COMPANIES: _____

ASSETS – OWNED BY: Filer / Spouse/domestic partner / Child / PERCENT: _____

ASSETS – MANAGED BY: _____

ASSETS – IDENTIFY FUND or COMPANIES: _____

<p>GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.</p>	<p>CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners</p>	<p>IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"</p>
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



SCHEDULE E

1. LOANS, LOAN GUARANTEES & DEBTS OVER \$1,000 NONE: check box → x

Report each creditor or lender to whom more than \$1,000 was owed during the reporting period. Report guarantor of each loan. List financial obligations, including mortgages on property owned or sold during the reporting period; loans that have been guaranteed; delinquent taxes; alimony; child support payments; medical bills; boat and vehicle loans; business and personal loans; cscrows; student loans; signature loans and promissory notes. Loans include secured, unsecured and contingent loans. *Do NOT list credit card obligations or revolving charge accounts.*

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER / CREDITOR / GUARANTOR / NAME: _____

2. FOR LEGISLATIVE BRANCH FILERS ONLY NONE: check box →

Legislative branch filers must report additional details: original amount of the obligation, the current balance owed, interest rate, length of the loan and whether a written agreement exists for a creditor or lender who:

- Lobbies or hired lobbyists
- Had contracts or sought contracts worth more than \$10,000 with any state agency
- Was a municipal or local government entity
- Was affected financially – in an amount exceeding \$1,000 – by an act of the legislature or state agency decision, including actions affecting professional or occupational licenses; natural resource permits or quotas; assessments; tax rates; health, safety or environmental standards; insurance or business practices.

DEBTOR: Filer / Spouse/domestic partner / Child

LENDER or CREDITOR / Name: _____

Address: _____

Original loan: \$ _____ Balance owed: \$ _____ Interest rate: _____ %

Term: _____ years _____ months / WRITTEN LOAN AGREEMENT? Yes / No

SCHEDULE F

1. LEASES: GOVERNMENT CONTRACTS & LEASES NONE: check box →

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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JAN 13 2010



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009 – Dec. 31, 2009



List all contracts, bids and offers to contract with the state or any state or municipal agency or entity. Report contract interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company or through a corporation in which filer or family members held a controlling interest.

CONTRACTOR: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** Professional Services Contract

Bid / Offer / Held / **CONTRACT ID (name/number):** 2006-0200-5577 – Legal Services

CONTRACTING AGENCY: State of Alaska; Department of Administration

CONTRACT DESCRIPTION: Court appointed Legal Services

CONTRACTOR: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **CONTRACT ID (name/number):** _____

CONTRACTING AGENCY: _____

CONTRACT DESCRIPTION: _____

2. LEASES: NATURAL RESOURCE LEASES

NONE: check box →

List natural resource leases – including mineral, timber, oil and gas leases – held, bid or offered during the reporting period. Report lease interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company, or corporation in which you or family (individually or together) held controlling interest.

LEASEHOLDER: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **LEASE ID (name/number):** _____

LEASE DESCRIPTION: _____

LEASEHOLDER: Filer / Spouse/domestic partner / Child / **TYPE of INTEREST:** _____

Bid / Offer / Held / **LEASE ID (name/number):** _____

LEASE DESCRIPTION: _____

SCHEDULE G

1. CLOSE ECONOMIC ASSOCIATIONS

NONE: check box →

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. <i>For example, check multiple boxes for joint property owners</i>	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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JAN 13 2010



ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



EXEMPT: Municipal and local officials are exempt from reporting close economic associations. Members of state boards and commissions are exempt from reporting close economic associations. Local officials and state board/commission members do NOT have to complete this section. Check the box for NONE.

STATE PUBLIC OFFICIALS: Disclose financial relations with legislators, other public officials and lobbyists.

LEGISLATIVE BRANCH: Disclose financial relations with public officials, lobbyists, other legislators, and legislative employees. Report close economic association detailed information to the Legislative Ethics Committee.

CLOSE ECONOMIC ASSOCIATION means a financial relationship between public officials, legislators and lobbyists, including shared interests in a business, property, association, partnership, corporation or LLC.

CHANGES: Report new close economic associations within 60 days.

PERSON DISCLOSING ECONOMIC ASSOCIATION: Filer / Spouse/domestic partner / Child

PERSON with WHOM ASSOCIATION EXISTS: _____

DESCRIPTION of ECONOMIC ASSOCIATION: _____

PERSON DISCLOSING ECONOMIC ASSOCIATION: Filer / Spouse/domestic partner / Child

PERSON with WHOM ASSOCIATION EXISTS: _____

DESCRIPTION of ECONOMIC ASSOCIATION: _____

2. FILERS WITH A LOBBYIST SPOUSE or DOMESTIC PARTNER NONE:

EXEMPT: Local officials and members of state boards and commissions are EXEMPT. Check NONE.

STATE PUBLIC OFFICIALS with a lobbyist spouse or domestic partner: Report names and addresses of each employer of the lobbyist and the total monetary value received from each of the lobbyist's employers.

LEGISLATIVE BRANCH filers with a lobbyist spouse or domestic partner: Disclose employer of lobbyist and compensation, and report details to the Legislative Ethics Committee.

CHANGES: Report changes in lobbyist's employer within 48 hours of the change.

LOBBYIST'S EMPLOYER: NAME & ADDRESS	COMPENSATION

CERTIFICATION

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.	CHECK ALL BOXES THAT APPLY. For example, check multiple boxes for joint property owners	IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"
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ALASKA PUBLIC OFFICES COMMISSION
2010 FINANCIAL DISCLOSURE STATEMENT
Covers the reporting period Jan. 1, 2009– Dec. 31, 2009



I certify under penalty of perjury that the foregoing is true and the information in this disclosure 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.

SIGNATURE

H. Conner Thomas

If you are filing online, you must have an Electronic Filing Agreement with APOC to use an electronic signature.

NAME of FILER

H. Conner Thomas

DATE & PLACE SIGNED / FILED

1/10/10 Nome, Alaska

All officials and candidates who are required to file disclosure statements are solely responsible for filing complete, accurate and truthful statements by the deadlines.

WHERE TO FILE THIS STATEMENT

STATE OFFICIALS: File initial, annual and final statements with the Alaska Public Offices Commission.

STATE CANDIDATES: File with the Division of Elections along with Declaration of Candidacy.

BOROUGH / MUNICIPAL / CITY OFFICIALS and CANDIDATES: File with city or borough clerk where you hold or seek office.

FILE ELECTRONICALLY to APOC: doa.apoc.reports@alaska.gov

THIS IS A PUBLIC DOCUMENT

NOTE: Public officials who are required to file this disclosure statement may have additional obligations to disclose conflicts of interest or potential conflicts under state executive, legislative or judicial ethics rules or personnel rules. Legislators who are required to file this disclosure statement have additional disclosure and reporting requirements imposed by the Select Committee on Legislative Ethics. Local officials may also be governed by local ethics ordinances or personnel rules.

Disclosure forms, guidelines, laws and regulations are online: doa.alaska.gov/apoc or from APOC offices

ALASKA PUBLIC OFFICES COMMISSION

ANCHORAGE OFFICE:

2221 E. Northern Lights Blvd – Rm 128
 Anchorage, AK 99508-4149
 907-276-4176 / Toll-free 800-478-4176
 Fax 907-276-7018

JUNEAU OFFICE:

240 Main St. – Rm 500
 Mail: P.O. Box 110222
 Juneau, AK 99811-0222
 907-465-4864 / Fax 907-465-4832

E-mail APOC: doa.apoc@alaska.gov

File electronic disclosure statements to: doa.apoc.reports@alaska.gov

GIVE DETAILED DESCRIPTIONS WHERE REQUESTED. USE EXTRA PAGES IF NECESSARY.

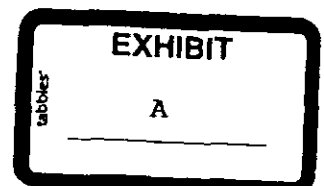
CHECK ALL BOXES THAT APPLY.
 For example, check multiple boxes for joint property owners

IF YOU HAVE NOTHING TO REPORT or A SECTION DOES NOT APPLY TO YOU, CHECK "NONE"

JAN 13 2010

2009 Disclosures

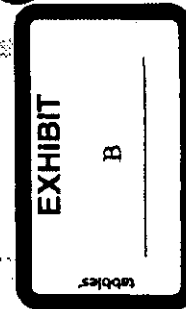
Conrad Klemzak P.O. Box 1990 Nome, AK 99762	Roy Adams P.O. Box 29 Kivalina, AK 99750	Sitnasuak Native Corp. P.O. Box 905 Nome, AK 99762	Johnnie Carter c/o Alaska Court System P.O. Box 317 Kotzebue, AK 99752
Patricia Beckner P.O. Box 1817 Nome, AK 99762	Leo Douglas P.O. Box 47 Shungnak, AK 99773	Diana Ellanna P.O. Box Nome, AK 99762	Janalee Minnich P.O. Box Kotzebue, AK 99752
Charles Myers P.O. Box 125 Selawik, AK 99770	Lorin Downing P.O. Box 1074 Kotzebue, AK 99752	Barbara Keena - 1045 16th Ave. S. St. Cloud, MN 56301	Sean Penetac P.O. Box 337 Nome, AK 99762
Calvin Gooden P.O. Box 2018 Nome, AK 99762	Estate of Xavier Pete c/o Box 61 Nome, AK 99762	Jake Sherman P.O. Box 878 Nome, AK 99762	Cynthia Poepppe P.O. Box 765 Kotzebue, AK 99752
Golovin Native Corporation P.O. Box 62099 Golovin, AK 99762	Ron Hunnicutt P.O. Box 472 Kotzebue, AK 99752	Jerry Austin P.O. Box 110 St. Michael, AK 99659	Elim Native Corporation P.O. Box 390910 Elim, AK 99739
Frank Lane P.O. Box 578 Kotzebue, AK 99752	Jeremiah Pete P.O. Box 1017 Stebbins, AK 99	Jeffrey Avery 189 E. Nelson Wasilla, AK 99654	Jim West, Jr. P.O. Box 967 Nome, AK 99762
Louis Warnke-Green P.O. Box 278 Nome, AK 99762	Duane Sampson P.O. Box 1088 Kotzebue, AK 99752	Bobby Frankson P.O. Box 209 Pt. Hope, AK 99766	Mario Casados P.O. Box 83 Pt. Hope, AK 99766
Mike Owens P.O. Box 1515 Nome, AK 99762	Blanche Cragle 4741 Hwy. 22 South Dickenson, ND 58601	Chester Koonuk P.O. Box 85 Pt. Hope, AK 99766	Lawrence Westlake, Jr. P.O. Box 110 Kiana, AK 99749
Sarah Kristiansen P.O. Box 444 Nome, AK 99762	Danny Aukon, Jr. P.O. Box 1968 Nome, AK 99762	Barbara Earp 21228 Lowland Ave. Eagle River, AK 99577	Brenda Green P.O. Box 1602 Nome, AK 99762
Michael West P.O. Box 751 Nome, AK 99762	Richard Patterson P.O. Box 1362 Barrow, AK 99723	Office of Public Advocacy 900 W. 5th Ave., Suite 525 Anchorage, AK 99501	Axel Odden P.O. Box 1043 Nome, AK 99762



Kathleen Haugan c/o Alaska Court System P.O. Box 317 Kotzebue, AK 99752			
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SNAPSHOT Current period ending November 30, 2009



ACCOUNT NAME: H CONNER THOMAS &
MARGARET A THOMAS JTWROS

ACCOUNT NUMBER: [REDACTED]

Your Financial Advisor:
LISA DOCHE & RALPH PAPETTI
Phone: 480-419-9600 / 800-453-6737

20551 NORTH PIMA RD
SUITE 200
SCOTTSDALE AZ 85255

If you have more than one account with us, why not link them and receive summary information for your entire household? Contact Your Financial Advisor for more details.

Message from Wells Fargo Advisors

WELLS FARGO & CO. WAS FOUNDED ON WALL STREET MORE THAN 150 YEARS AGO, AND OPENED ITS FIRST OFFICE IN SAN FRANCISCO IN 1852. TODAY, WELLS FARGO ADVISORS CARRIES ON THE COMPANY'S STORIED TRADITION OF HELPING FAMILIES MANAGE THE IMPORTANT ASPECTS OF THEIR FINANCIAL LIFE.

010809 02 MAAD 50 AUTO**MIXED AADC 945
H CONNER THOMAS &
MARGARET A THOMAS JTWROS
PO BOX 865
NOME AK 99762-0865



JAN 18 2010

Wells Fargo Advisors, LLC, member NYSE/SIPC. Brokerage accounts are carried by First Clearing, LLC (FCC), member NYSE/SIPC.

Additional information

Gross proceeds

Portfolio detail

Cash and Sweep Balances

Bank Deposit Sweep - Consists of monies held deposited at one or more additional banks affiliated with the Bank. For additional information on the Bank's FDIC rules. For additional information on the Bank's

DESCRIPTION

Cash

BANK DEPOSIT SWEEP
Interest Period 11/01/09 - 11/30/09

Total Cash and Sweep Balances

* APY measures the total amount of the interest yield is expressed as an annualized rate, based on

Stocks and Options

Stocks

DESCRIPTION

AMGEN INC
AMGN
Acquired 09/04/07

FIRST TRUST ETF
NYSE ARCA BIOTEC
FBT
Acquired 07/24/07
Acquired 07/24/07

Total

GARMIN LTD
GRMN
Acquired 05/03/07

JAN 3 2010



Stocks and Options

Stocks continued

DESCRIPTION	
1 SHARES S&P GLOBAL TECHNOLOGY SECTOR INDEX FD IXN Acquired 01/11/06 Acquired 09/26/07	2
Total	3
INDEX SHS INC MSCI S KOREA WEBS INDEX FUND WEBS INDEX SERIES EWY Acquired 09/26/07	2
1 SHARES BARCLAYS TIPS BOND FUND TIP Acquired 07/24/09	10
MARKET VECTORS ET GLOBAL ALTERNATIVE ENERGY GEX Acquired 05/01/09 Acquired 05/13/09	40 20
Total	60
NORTEL NETWORKS CORP NRTLO Acquired 06/18/08	
RYDEX S&P EQUAL WEIGHT FINANCIAL RYF Acquired 04/11/08 Acquired 06/04/08	37 7
Total	45
SECTOR SPDR TR TECHNOLOGY SELECT SECTOR XLK Acquired 12/19/03	50

JAN 19 2010

Stocks and Options

Stocks continued

DESCRIPTION
Acquired 12/21/04

Total

TEVA PHARMACEUTICAL
ADR INDS LTD
TEVA
Acquired 08/17/04

Total Stocks

Total Stocks and Options

Cost information for one or more securities is not available.

Mutual Funds

Mutual fund shares are priced at net asset value.

Open End Mutual Funds

DESCRIPTION

ALLIANCEBERNSTEIN FDS
INTERNATIONAL GROWTH
FUND CL A
AWPAX
Acquired 02/19/99
Reinvestments

Total

FIRST EAGLE FDS INC
OVERSEAS FD CL A
SGOVX
Acquired 12/10/02
Reinvestments

Total

JAN 1 8 2010





Mutual Funds

Open End Mutual Funds continue

DESCRIPTION:

GOLDMAN SACHS TR FINL
SQUARE MONEY MKT FD
INSTL CLASS
FSMXX
Acquired 07/25/06
Acquired 12/20/07
Reinvestments

Total

HARTFORD FORTIS FUNDS
SMALLCAP GRWTH CL A
HSLAX
Acquired 09/15/05
Acquired 03/31/06
Reinvestments

Total

HARTFORD MUT FDS INC
CAP APPREC FD CL A
ITHAX
Acquired 09/15/05
Acquired 04/24/08
Reinvestments

Total

KEELEY FUNDS INC
SMALL CAP VALUE FUND
CLASS A SHARES
KSCVX
Acquired 09/27/07
Acquired 10/15/09
Reinvestments

Total

PIMCO FDS PAC INVT
MGMT SER-COMMODITY REAL
RETURN STRAT FD INSTL CL
PCRIX
Acquired 12/01/03
Acquired 10/15/09
Reinvestments

Total

JAN 1 8 2010

WSP63

Mutual Funds

Open End Mutual Funds continued

DESCRIPTION

VAN KAMPEN MID CAP
GROWTH FUND CLASS A
VGRAX
Acquired 07/14/05
Reinvestments

Total

VAN KAMPEN AMERICAN
FRANCHISE FUND CLASS A
Acquired 08/04/09

WT MUT FD CRM MID CAP
VALUE FD INSTL CL
Acquired 09/15/05
Reinvestments

Total

Total Open End Mutual Funds

Closed End Mutual Funds

DESCRIPTION

BLACKROCK REAL ASSET
EQUITY TR
BCF
Acquired 07/09/07
Acquired 07/09/07
Acquired 07/09/07
Acquired 05/13/09

Total

COHEN & STEERS WORLDWID
REALTY INCOME FUND INC
RWF
Acquired 06/04/09

JAN 13 2010

WELLS
FARGO

ADVISORS

Mutual Funds

Closed End Mutual Funds continu

DESCRIPTION

ADVENT/CLAYMORE GLOBAL
CONVERTIBLE SECURITIES &
INCOME FUND
AGC
Acquired 06/04/08
Acquired 06/04/08
Acquired 10/15/09

Total

NUVEEN INSD MUN OPPTY FD
INC
NIO
Acquired 12/27/94
Acquired 09/26/07
Acquired 02/18/09

Total

Total Closed End Mutual Funds

Total Mutual Funds

Bank Deposit Sweep Allo

Monies on deposit at each bank, together
bank in accordance with FDIC rules for a
and therefore not covered by SIPC. Settli
that occurs after 2 PM ET on the last busir

DESCRIPTION

WELLS FARGO BANK, N.A.

Total Bank Deposits

JAN 1 8 2010

WSP



Retirement Savings Statement

March 1, 2009 - May 31, 2009

**Lewis & Thomas, P.C. 401(K)
Profit Sharing Plan**

H CONNER THOMAS
P.O. BOX 865
NOME, AK 99762

For information virtually 24 hours a day call:
1-800-835-5097
Internet Address: <http://netbenefits.401k.com>
Representatives are available 8:30 AM - 8:00 PM

Your Account Summary

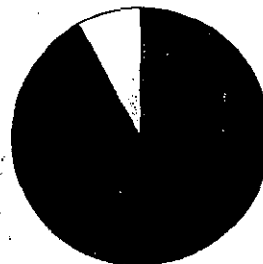
Beginning Balance
Your Contributions
Change in Market Value
Ending Balance

Additional Information
♦ Vested Balance
♦ Dividends & Interest

Your Personal Rate of Return
This Period 19.2%
Year to Date 7.5%

Your Personal Rate of Return is calculated with a time-weighted formula, widely used by financial analysts to calculate investment earnings. It reflects the results of your investment selections as well as any activity in the plan account(s) shown. There are other Personal Rate of Return formulas used that may yield different results. Remember that past performance is no guarantee of future results.

Your Asset Allocation



Stocks 56%
Bonds 36%
Short-Term 8%

Your account is currently allocated among the asset classes specified above. Percentages and totals may not be exact due to rounding.

The Additional Fund Information section lists the allocation of your blended funds.

Market Value of Your Account

Displayed in this section is the value of your account for the statement period, in both shares and dollars:

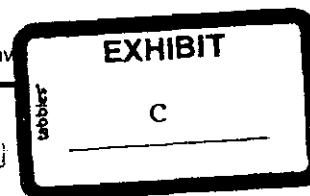
Investment	Shares on 02/28/2009	Shares on 05/31/2009	Price on 02/28/2009	Price on 05/31/2009	Market Value on 02/28/2009	Market Value on 05/31/2009
Blended Investment* Fid Freedom 2015			\$7.72	\$9.16		
Account Total						

Remember that a dividend payment to fund shareholders reduces the share price of the fund, so a decrease in the share price for the statement period does not necessarily reflect lower fund performance.

* Some of your investments are classified as a Blended Investment. Blended Investments may include a mixture of stocks, bonds, and/or short term assets. Please refer to the "Additional Investment Information" section to determine the allocation of your blended investments' underlying assets. The asset breakdown of your portfolio is reflected in the pie chart in the "Asset Allocation" section.

Please read this statement carefully. Any error must be reported to Fidelity Inv

13266 K1013266 0001 20090606 K100



JAN 13 2010

Market Value of Your Account (continued)

Please refer to NetBenefits and other Plan information, such as your SPD, for a description of your right to direct investments under the Plan. For information on any plan restrictions on those rights, please contact your benefits office.

To help achieve long-term retirement security, you should give careful consideration to the benefits of a well-balanced and diversified investment portfolio. Spreading your assets among different types of investments can help you achieve a favorable rate of return, while minimizing your overall risk of losing money. This is because market or other economic conditions that cause one category of assets, or one particular security, to perform very well often cause another asset category, or another particular security, to perform poorly. If you invest more than 20% of your retirement savings in any one company or industry, your savings may not be properly diversified. Although diversification is not a guarantee against loss, it is an effective strategy to help you manage investment risk.

In deciding how to invest your retirement savings, you should take into account all of your assets, including any retirement savings outside of the Plan. No single approach is right for everyone because, among other factors, individuals have different financial goals, different time horizons for meeting their goals, and different tolerances for risk. It is also important to periodically review your investment portfolio, your investment objectives, and the investment options under the Plan to help ensure that your retirement savings will meet your retirement goals. Visit the Department of Labor website <http://www.dol.gov/ebsa/investing.html> for information on individual investing and diversification.

Your Contribution Elections as of 06/05/2009

This section displays the funds in which your future contributions will be invested.

<u>Investment</u>	<u>Percent</u>		
Fid Freedom 2015	100%		
Total	100%		

<u>Contributions</u>	<u>Employee Deferral</u>	<u>Profit Sharing</u>	<u>Rollover</u>
This Period	██████████	\$0.00	\$0.00
Year To Date	██████████	\$0.00	\$0.00
Inception To Date	██████████	\$0.00	\$0.00
Vested Percent	100.00	100.00	100.00
Total Account Balance	██████████	██████████	██████████
Total Vested Balance	██████████	██████████	██████████

Your Account Activity

Use this section as a summary of transactions that occurred in your account during the statement period.

<u>Activity</u>	<u>Fid Freedom 2015</u>
Beginning Balance	██████████
Your Contributions	██████████
Change in Market Value	██████████
Ending Balance	██████████
Dividends & Interest	

A Message from Fidelity Investments

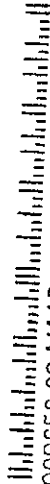
To access performance information on the investment options available in your Plan - log onto NetBenefits at www.401k.com or call your plan's toll-free number.

Before investing in any mutual fund, please carefully consider the investment objectives, risks, charges and expenses. For this and other information, call or write Fidelity for a free prospectus. Read it carefully before you invest.

Fidelity Brokerage Services LLC, Member NYSE, SIPC, 300 Puritan Way, Marlborough, MA 01752.

JAN 18 2010





 009656 02 MAAD 43 AUTO**MIXED AADC 945
 H CONNER THOMAS IRA
 FCC AS CUSTODIAN
 PO BOX 865
 NOME AK 99762-0865



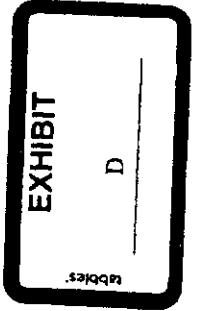
SNAPSHOT
 Current period ending November 30, 2009

ACCOUNT NAME: H CONNER THOMAS IRA
 FCC AS CUSTODIAN

ACCOUNT NUMBER: 

Your Financial Advisor:
 LISA DOCHE & RALPH PAPETTI
 Phone: 480-419-9600 / 800-453-6737

20551 NORTH PIMA RD
 SUITE 200
 SCOTTSDALE AZ 85255



43,053
 JAN 12 2010

If you have more than one account with us, why not link them and receive summary information for your entire household? Contact Your Financial Advisor for more details.

Message from Wells Fargo Advisors

WELLS FARGO & CO. WAS FOUNDED ON WALL STREET MORE THAN 150 YEARS AGO, AND OPENED ITS FIRST OFFICE IN SAN FRANCISCO IN 1852. TODAY, WELLS FARGO ADVISORS CARRIES ON THE COMPANY'S STORIED TRADITION OF HELPING FAMILIES MANAGE THE IMPORTANT ASPECTS OF THEIR FINANCIAL LIFE.

Wells Fargo Advisors, LLC, member NYSE/SIPC. Brokerage accounts are carried by First Clearing, LLC (FCC), member NYSE/SIPC.



Additional information

Gross proceeds

Portfolio detail

Cash and Sweep Balances

Bank Deposit Sweep - Consists of monies deposited at one or more additional banks a FDIC rules. For additional information on the

DESCRIPTION

Cash

BANK DEPOSIT SWEEP

Interest Period 11/01/09 - 11/30/09

Total Cash and Sweep Balances

* APY measures the total amount of the interest yield is expressed as an annualized rate, bas

Stocks and Options

Stocks

DESCRIPTION

VANGUARD UTILITIES ETF

VPU

Acquired 08/07/09

Total Stocks

Total Stocks and Options

JAN 3 2010

WSP63RD

Mutual Funds

Mutual fund shares are priced at net asset value

Closed End Mutual Funds

DESCRIPTION

BLACKROCK FLOATING RATE
INCOME TRUST

FRA
Acquired 09/14/06
Acquired 06/27/07

Total

BLUE CHIP VALUE FD INC

BLU
Acquired 08/07/09

EVERGREEN INCOME ADV

FD
EAD
Acquired 08/17/04
Acquired 06/27/07

Total

Total Closed End Mutual Funds

Total Mutual Funds

Bank Deposit Sweep Allocated

Monies on deposit at each bank, together with a bank in accordance with FDIC rules for a total of and therefore not covered by SIPC. Settlement that occurs after 2 PM ET on the last business day

DESCRIPTION

WELLS FARGO BANK, N.A.

Total Bank Deposits

JAN 13 2010





Division of Retirement & Benefits
 C/O Great-West Retirement Services
 P.O. Box 173764
 Denver, CO 80217-3764

STATE OF ALASKA

H C THOMAS
 BOX 865
 NOME AK 99762

Statement Period: 07/01/2009 - 09/30/2009
 Participant ID: ██████████
 Plan: 98214
 State of Alaska

98214-01 457 Plan = Alaska Deferred Compensation Plan (DCP) \ 98214-03 401(a) Plan = Alaska Supplemental Benefits-Annuity Plan (SBS-AP)

Account Summary

	98214-03 401(a) Plan
Balance as of June 30, 2009	\$ ██████████
Change in Value	██████████
Expenses	██████████
Balance as of September 30, 2009	\$ ██████████

Up to date account information, investment returns, and plan highlights can be obtained 24 hours a day online at www.alaska.gov/drb.

GREEN IS TWICE-AS-NICE! You're already saving the green by investing in your retirement plan, but did you know that you can also receive your quarterly statements and stuffers electronically? Visit our website today to sign up for Online File Cabinet.

Investment Selection for Future Contributions

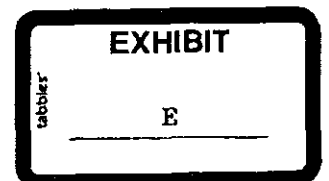
All future contributions will be directed as follows:

100% Alaska Balanced Trust

JAN 3 2010



Great-West
 RETIREMENT SERVICES
Securities, when offered, are offered through GWFS Equities, Inc., a wholly owned subsidiary of Great-West Life & Annuity Insurance Company.
 Great-West Retirement Services
 P.O. Box 173764, Denver, CO 80217-3764



STATE OF ALASKA

H C THOMAS

Account Summary by Investment Option

	<u>Beginning Balance</u>	<u>Deposits</u>	<u>Change in Value</u>	<u>Transfers</u>	<u>Withdrawals /Expenses</u>	<u>Ending Balance</u>	<u>Ending Unit Share</u>
Alaska Balanced Trust	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Totals	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Account Summary by Contribution Source

	<u>Beginning Balance</u>	<u>Deposits</u>	<u>Change in Value</u>	<u>Transfers</u>	<u>Withdrawals /Expenses</u>	<u>Ending Balance</u>
Employee Before Tax	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Employer Before Tax	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Totals	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Beneficiary Information

Great-West Retirement Services does not currently hold a beneficiary designation on your account. You may update this information by visiting your plan's website at www.state.ak.us/dr/b. Log in to your account and click on the "Change Beneficiary" link under the Change Account menu option.

General Information

	<u>Employee</u>	<u>Employer</u>	<u>Total</u>
2008 Year-End Balance:	[REDACTED]	[REDACTED]	[REDACTED]

JAN 13 2010

Alaska Public Employees' Retirement System

2009 Annual Benefit Statement

The account and service information contained in this statement is based on data reported by your employer(s). Please contact your employer(s) about any discrepancies. The benefit information shown is an estimate. While every effort has been made to ensure the accuracy of your statement, please know it does not have the force and effect of the law, rule, or regulations governing the payment of benefits. All benefits will be paid under the provisions of the applicable Alaska Statutes and Federal law.



H CONNOR THOMAS
PO BOX 865
NOME, AK 99762-0865

The Alaska Division of Retirement & Benefits is pleased to provide you with this personalized benefit statement highlighting the financial security you are building for the future. It also summarizes the protection you and your family have against financial losses that may occur because of your disability or death. This statement is produced using data as of 6/30/2009. Please review the statement carefully, verifying total years of service and personal data such as birth date, marital status, etc.

Your benefits are a significant portion of your compensation package. The value of your benefits will continue to increase over time and you will want to compare this statement with those you receive in the future to measure your progress. Most financial planners suggest you need 80% to 85% of your current monthly income to maintain your standard of living at retirement. When you are two years away from retirement, visit our website or contact the Division of Retirement and Benefits to enroll in a retirement planning seminar.

Personal Information

Name: H CONNOR THOMAS
Retirement ID Number: [REDACTED]
BirthDate: 12/20/1951 Marital Status: M

Account Summary as of 6/30/2009

- Our records indicate you are in Tier 1
- Your total service is 3.12328 years
- You are not vested in PERS
- Your estimated average monthly earnings are \$ [REDACTED]
- You currently have no service indebtedness

Annual Contribution Summary

7/1/2008 Account Balance:	\$ [REDACTED]
Mandatory Contributions Made:	\$0.00
Mandatory Interest Earned:	\$ [REDACTED]
6/30/2009 Account Balance:	\$ [REDACTED]

Projected Retirement Summary

Your current PERS status means that you must be 55 years old and be vested or have 30 years of service to be eligible for normal retirement.

Monthly plan benefits shown on this statement were estimated under the normal retirement option, which provides you with a monthly income for your lifetime. Surviving beneficiaries are eligible to receive money from the PERS. If a retiree was eligible for health insurance benefits at the time of death, their surviving spouse may continue to be eligible for the same health insurance benefits.

JAN 13 2010

EXHIBIT

F

New York Life Insurance and Annuity Corporation
(A Delaware Corporation)
PO Box 130539
Dallas, TX 75313
(800) 695-1314

The Company You Keep



ANNIVERSARY NOTICE

|||||
MRS MARGARET A THOMAS
PO BOX 865
NOME, AK 99762-0865

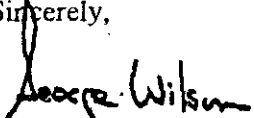
Agent/Representative
JOHN LUKEHART CLU CHFC
701 W 8TH AVE STE 900
ANCHORAGE, AK 99501-3467
(907) 257-5213

Welcome to your Single Premium Retirement Annuity-2 Update! This notice is designed to keep you in touch with your policy as it continues to grow in value.

<u>CLIENT ID</u>	<u>POLICY NUMBER</u>	<u>POLICY DATE</u>	<u>ANNUITANT</u>
██████████	██████████	1/13/1992	MRS MARGARET A THOMAS
	<u>TOTAL PREMIUM</u>	<u>ANNIVERSARY DATE</u>	
	\$18,388.23	1/13/2009	
CASH VALUE AS OF 1/13/2008:		\$	██████████
INTEREST EARNED FOR POLICY YEAR:			██████████
WITHDRAWAL(S) DURING POLICY YEAR:			0.00
SURRENDER CHARGES INCURRED DURING POLICY YEAR:			0.00
CASH VALUE AS OF 1/13/2009:		\$	██████████
INITIAL PREMIUM EFFECTIVE ANNUAL YIELD GUARANTEED TO 1/13/2010: 4.00%			

Your continued satisfaction is important to us. Both your agent and I will be happy to answer any questions you may have. Just give us a call!

Sincerely,


George E. Wilson, FLMI
Service Center Vice President

JAN 13 2010



QUARTERLY STATEMENT

January 1, 2009 to September 30, 2009

PREPARED FOR:

BROKER/DEALER:

101728-11

MARGARET A THOMAS 403B PLAN
PO BOX 865
NOME AK 99762-0865

LISA L DOCHE
WACHOVIA SECURITIES LLC
20551 N PIMA RD
STE 200
SCOTTSDALE AZ 85255



Sun Life Assurance Company of Canada (U.S.) (Sun Life) is a member of the Sun Life Financial group of companies. Sun Life provides this confirmation on behalf of the broker/dealer of record, who is acting as agent of Sun Life.

12/31/2008 Value

\$ [REDACTED]

09/30/2009 Value

\$ [REDACTED]

CONTRACT INFORMATION

Contract No. [REDACTED] **Compass 3 Fixed/Variable Annuity**

Issue Date: January 07, 1992 Agent Number: 3000-235611
Annuitant Name: MARGARET A THOMAS Dealer Number: 01094-021178
Primary Beneficiary: H CONNER THOMAS

CURRENT INVESTMENT PERFORMANCE

Variable Investment Option	Beginning Value 12/31/2008	Current Year Net Activity	Number of Units	Unit Value	Ending Value 09/30/2009	Net Change in Value
Total Return	\$ [REDACTED]	\$ [REDACTED]	4104.71330	\$ [REDACTED]	\$ [REDACTED]	\$ [REDACTED]
Grand Total	\$ [REDACTED]	\$ [REDACTED]			\$ [REDACTED]	\$ [REDACTED]

HISTORICAL TRANSACTION SUMMARY

Investment Option	January 07, 1992 - September 30, 2009 (Issue Date to Present)		January 01, 2009 - September 30, 2009 (Year to Date)	
	Investments	Withdrawals	Investments	Withdrawals
Total Return	\$ [REDACTED]	\$0.00	\$0.00	\$0.00
Government Securities	\$ [REDACTED]	\$0.00	\$0.00	\$0.00
Total	\$ [REDACTED]	\$0.00	\$0.00	\$0.00

If you find an error in this statement, you should notify us at the address or telephone number provided on the statement. Unless we receive notice of any such error from you within 60 days of the period ending date of this statement, we may not be responsible for correcting the error.

DEATH BENEFIT INFORMATION

Listed below are the applicable death benefit values for your contract:

- Account Value [REDACTED]
- Net Purchase Payments [REDACTED]
- 7th Anniversary Account Value [REDACTED]

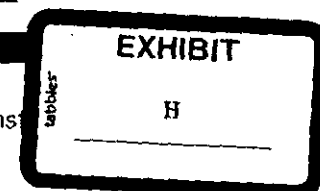
Greatest of above amounts is: 7th Anniversary Account Value

Total Death Benefit amount as of statement date [REDACTED]

JAN 13 2010

ADDITIONAL CONTRACT INFORMATION

No fund transfer(s) processed during this contract year. Please refer to the prospectus for more information about the policy.





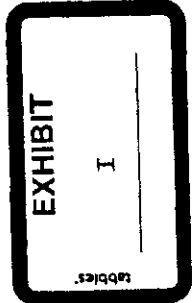
SNAPSHOT

Current period ending September 30, 2009

ACCOUNT NAME:

MARGARET A THOMAS IRA R/O
FCC AS CUSTODIAN

ACCOUNT NUMBER:



Your Financial Advisor:
LISA DOCHE & RALPH PAPETTI
Phone: 480-419-9600 / 800-453-6737

20551 NORTH PIMA RD
SUITE 200
SCOTTSDALE AZ 85255

031043 02 MAAD 140 AUTO**MIXED AADC 945
MARGARET A THOMAS IRA R/O
FCC AS CUSTODIAN
PO BOX 865
NOME AK 99762-0865



If you have more than one account with us, why not link them and receive summary information for your entire household? Contact Your Financial Advisor for more details.

Message from Wells Fargo Advisors
THE WACHOVIASEC.COM WEB SITE IS MOVING. BEGINNING OCT. 19, THE WACHOVIASEC.COM WEB ADDRESS WILL TAKE YOU TO WELLSFARGOADVISORS.COM. YOU CAN ACCESS YOUR ACCOUNT(S) AS WELL AS VALUABLE INFORMATION ABOUT THE MARKETS AND OUR PRODUCTS AND SERVICES ON THAT WEB SITE.

JAN 13 2010



Portfolio detail

Cash and Sweep Balances

Bank Deposit Sweep - Consists of monies deposited at one or more additional banks at FDIC rules. For additional information on the

DESCRIPTION

BANK DEPOSIT SWEEP
Interest Period 09/01/09 - 09/30/09

Total Cash and Sweep Balances

* APY measures the total amount of the interest yield is expressed as an annualized rate, based on

Mutual Funds

Mutual fund shares are priced at net asset value

Open End Mutual Funds

DESCRIPTION

PRINCIPAL INVESTORS
SAM COM GROWTH
PORTFOLIO A
SAGPX
Acquired 11/08/05
Acquired 11/14/05
Reinvestments

Total

Total Open End Mutual Funds

Total Mutual Funds

JAN 1 2 2010

WSP63FLD

Alaska Public Employees' Retirement System

2009 Annual Benefit Statement

The account and service information contained in this statement is based on data reported by your employer(s). Please contact your employer(s) about any discrepancies. The benefit information shown is an estimate. While every effort has been made to ensure the accuracy of your statement, please know it does not have the force and effect of the law, rule, or regulations governing the payment of benefits. All benefits will be paid under the provisions of the applicable Alaska Statutes and Federal law.



MARGARET A THOMAS
PO BOX 865
NOME, AK 99762-0865

The Alaska Division of Retirement & Benefits is pleased to provide you with this personalized benefit statement highlighting the financial security you are building for the future. It also summarizes the protection you and your family have against financial losses that may occur because of your disability or death. This statement is produced using data as of 6/30/2009. Please review the statement carefully, verifying total years of service and personal data such as birth date, marital status, etc.

Your benefits are a significant portion of your compensation package. The value of your benefits will continue to increase over time and you will want to compare this statement with those you receive in the future to measure your progress. Most financial planners suggest you need 80% to 85% of your current monthly income to maintain your standard of living at retirement. When you are two years away from retirement, visit our website or contact the Division of Retirement and Benefits to enroll in a retirement planning seminar.

Personal Information

Name: MARGARET A THOMAS
Retirement ID Number: [REDACTED]
BirthDate: 5/4/1957 Marital Status: M

Account Summary as of 6/30/2009

- Our records indicate you are in Tier 1
- Your total service is 5.11095 years
- Your service has been calculated using the alternate PERS option for school district employees
- You are vested in PERS
- Your estimated average monthly earnings are \$ [REDACTED]
- You currently have no service indebtedness
- Amount previously refunded to you is \$ [REDACTED]
- Your 2008 Reported Earnings were \$ [REDACTED]

Annual Contribution Summary

7/1/2008 Account Balance: \$ [REDACTED]
Mandatory Contributions Made: \$ [REDACTED]
Mandatory Interest Earned: \$ [REDACTED]
6/30/2009 Account Balance: \$ [REDACTED]

Projected Retirement Summary

Your current PERS status means that you must be 55 years old and be vested or have 30 years of service to be eligible for normal retirement.

Monthly plan benefits shown on this statement were estimated under the normal retirement option, which provides you with a monthly income for your lifetime. Surviving beneficiaries are eligible to receive money from the PERS. If a retiree was eligible for health insurance benefits at the time of death, their surviving spouse may continue to be eligible for the same health insurance benefits.

JAN 18 2010

EXHIBIT

J

ACCOUNT STATEMENT

January 1, 2009 to December 31, 2009

Page 1 of 2

ACCOUNT HOLDER OR CUSTODIAN

H CONNER THOMAS
PO BOX 865
NOME AK 99762-0865

YEAR-TO-DATE ACCOUNT SUMMARY

2009 Beginning Balance	\$ [REDACTED]
+ YTD Contributions	\$ [REDACTED]
- YTD Distributions	\$0.00
+/- Gain/Loss	\$ [REDACTED]

Total Ending Balance \$ [REDACTED]

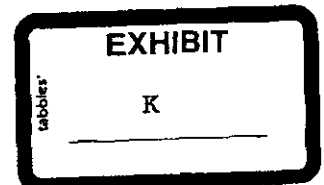
This year when you check "yes" on line 6 of your 2010 PFD application and contribute to the U A College Savings Plan, you'll be entered to win a \$25,000 scholarship account or one of four \$2,500 scholarship accounts awarded by the Education Trust of Alaska. Certain restrictions apply, visit uacollegesavings.com for more information.

ACCOUNT SUMMARY BY BENEFICIARY

BENEFICIARY NAME	YEAR TO DATE CONTRIBUTIONS	YEAR TO DATE DISTRIBUTIONS	ENDING BALANCE
MALSIE E THOMAS	[REDACTED]	\$0.00	[REDACTED]
	[REDACTED]	\$0.00	[REDACTED]



JAN 13 2010





Official Business

Alaska State Legislature

House of Representatives

Office of the Chief Clerk

State Capitol, Room 216
Juneau, AK 99801-1182
Phone: (907) 465-3725
Fax: (907) 465-5334

MEMORANDUM

Date: February 5, 2010

To: Representative Ramras, Chair
Judiciary Committee

From: Suzi Lowell *SL*
Chief Clerk

Subject: Governor's Appointment(s)

The Speaker referred the following Governor's appointment(s) to the Judiciary Committee:

Attorney General

Daniel S. Sullivan
Appointed: 6/16/2009

Board of Governors of the Alaska Bar Association

Donald McLean – Wasilla
Appointed: 3/1/2007
Reappointed: 3/1/2010 Term Expires: 3/1/2013

Public Defender

Quinlan Steiner – Anchorage
Appointed: 10/14/2005
Reappointed: 10/9/2009 Term Expires: 10/14/2013

Violent Crimes Compensation Board

Nora G. Barlow – Anchorage
Appointed: 3/1/2010 Term Expires: 3/1/2011

Gerad G. Godfrey – Eagle River
Appointed: 2/19/2003
Reappointed: 4/6/2004 Reappointed: 3/1/2007
Reappointed: 3/1/2010 Term Expires: 3/1/2013

The Referral for Confirmation page(s), resume(s), and a signature page are attached for your use. In addition, copies of the resume(s) are also being sent electronically.

Attachments as noted

Donald Rae McLean

P.O. Box 873836
Wasilla, Alaska 99687

Education

Bachelor of Science with Distinction Biology 1974
Virginia Polytechnic Institute and State University

Doctor of Dental Surgery 1978
Medical College of Virginia/Virginia Commonwealth University

Executive Juris Doctorate (in progress) expected completion: 2008
Concord School of Law

Professional Employment History

General Dentist (Captain) 1978-82
Elmendorf AFB, Alaska

Private Practice of Dentistry 1982-present
Wasilla, Alaska

Professional Licensure

Alaska State Dental License AK#522
Virginia State Dental License(inactive) #0401006134

Personal History

Born March 9, 1952 in Hopewell, Virginia
Parents: Charles L. McLean (deceased) and Katherine J. McLean who presently
resides in Lynchburg, Virginia
Married 31 years to Lynne F. McLean and 3 children; Kimberly (29 y.o.),
Nicole (26 y.o.), and Christopher (20 y.o.)
Interests include agriculture, sports, education and the news

QUINLAN STEINER

2205 Arlington Drive ♦ Anchorage, AK ♦ 907. 317.4746

Education:

Northwestern School of Law
of Lewis & Clark College
Juris Doctor

Portland, OR
1998

Seattle University
B.A. Business Administration

Seattle, WA
1989

West Anchorage High School

Anchorage, AK
1984

Work Experience:

Alaska Public Defender Agency
Director – Public Defender

Anchorage, AK
2005 – Present

Appointed to serve as the Public Defender for the State of Alaska and Director of the Alaska Public Defender Agency. The Public Defender Agency's mission is to provide constitutionally mandated legal representation to indigent individuals appointed by the courts in criminal and other state-initiated litigation.

Primary responsibilities include: directing organizational development in accordance with agency goals; personnel supervision and management; budget management; and testifying before the legislature on proposed legislation and budget proposals. Initiatives implemented: statewide case management system; regional organizational structure; new lawyer trial school; expanded recruiting program; mentoring program; and centralized appellate and post-conviction case processing.

Alaska Public Defender Agency
Assistant Public Defender

Anchorage, AK
1998 - 2005

Appellate Attorney: drafted appellate briefs and conducted oral argument before the Alaska Court of Appeals and the Alaska Supreme Court; consulted with and advised trial attorneys on trial litigation issues; advised the Public Defender on pending legislation and other legal issues affecting the Agency.

Trial Attorney: managed a District and Superior Court trial caseload in Anchorage and for St. Paul Island; and conducted felony and misdemeanor trials. Other Activities: trained and supervised legal interns and new attorneys; served as a member of the Public Defender Training Conference Committee; personally developed and implemented training sessions on trial advocacy, motion writing, and legal analysis for the Agency's new lawyers; and participated in meetings of the Appellate Rules Committee, Pattern Jury Instruction Committee, and Appellate Delay Committee.

Alaska Public Defender Agency
Investigator Intern / Legal Extern

Anchorage, AK
1995, 1997

Volunteered as an investigator in 1995 prior to attending law school. As a law student, served as legal extern in criminal law. Duties included conducting bail hearings, drafting appellate briefs, and conducted an oral argument before the Alaska Court of Appeals.

Intec Inc.
Financial Assistant/Lead Backcountry Guide

Anchorage, AK
1993-1995

Duties as financial assistant included strategic planning, preparing financial statements, and bookkeeping. Duties as backcountry guide included conducting backcountry ski and glacier travel trips, trip planning, meal preparation, and ensuring safety of clients and assistant guides.

National Bank of Alaska
Loan Officer

Juneau, AK
1990-1992

Completed management training program and worked as a loan officer in Juneau branch office. Commercial lending experience: business acquisition, lines of credit, letters of credit, equipment & inventory, commercial real estate, interim construction, SBA & BIA guaranteed, fishing boats. Consumer lending experience: automobile, boat, home equity, and personal. Participated in local branch board meetings on local and statewide financial outlook.

Northwest Deck Construction
Co-Owner

Seattle, WA
1987-1989

Established company designing and constructing residential decks; responsible for project schedule management; preparation of financial statements and tax returns.

Activities:

Member Alaska Bar Association (1998 – present)
Criminal Rules Committee (October 2006 – present)
Member of the Criminal Justice Working Group (2008 – present)
Youth Court Bar Class Instructor – Spring 2008
Panel Member for Anchorage Mayor's Anti-Gang and Youth Violence Summit: Law Enforcement and Legal Issues Related to Gangs (November 15, 2006)
Panel Member on Ethics in Criminal Law Practice at University of Southern Maine School of Law (2005)
University of Alaska, Adjunct Professor: Criminal Procedure (2002)
Alaska Youth Court, Mock Trial Judge (2000)
Member of Denali Expedition (1994)
Member University of Colorado Ski Team (1984-1986)
Member Alyeska Ski Club (until 1984; represented Alaska at the Junior Olympics)

NORA G. BARLOW

DeLisio Moran Geraghty & Zobel, P.C.
943 W. 6th Avenue
Anchorage, AK 99501
(907) 279-9574

EDUCATION:

1991 University of the Pacific, McGeorge School of Law
with Distinction, Order of the Coif

1989 London Institute of International Business and Commercial Law
"Fundamental Rights in Europe and the United States." Hon.
Anthony Kennedy, Associate Justice, United States Supreme Court

1986 University of California, Berkeley,
Bachelor of Arts, Environmental Science; Emphasis-Biology

EMPLOYMENT:

2006-present DeLisio Moran Geraghty & Zobel, P.C.
Associate Attorney; General civil litigation practice with an emphasis
in defense of employment law cases and workers' compensation
claims.

2004-2006 Russell Wagg Cooper & Gabbert, P.C., Anchorage, AK
Associate Attorney; Emphasis in workers' compensation defense.

2003-2004 Attorney General's Office, Anchorage, AK
Assistant Attorney General, Office of Special Prosecutions and
Appeals; Environmental Prosecutor.

2002-2003 District Attorney's Office, Anchorage, AK
Assistant District Attorney; Felony Prosecution of Property Crimes
and Sexual Assaults.

1999-2002 Office of the County Counsel, Contra Costa County, Martinez,
CA
Deputy County Counsel; Assigned to Juvenile Dependency and
Conservatorship Unit.

1995-1999 Heller Ehrman White & McAuliffe, San Francisco, CA and
Anchorage, AK
Associate Attorney; Complex civil litigation practice.

1992-1995 Burr Pease & Kurtz, Anchorage, AK
Associate Attorney; General civil litigation practice.

1991-1992 Law Clerk: "Hon. H. Russell Holland, Judge, United States District
Court for the District of Alaska and Hon. James M. Fitzgerald,
Senior Judge, United States District Court for the District of Alaska

Summer 1990 Pillsbury Madison & Sutro, San Francisco, CA
Summer Associate

BAR ADMITTANCE:

Admitted in California 1992
Admitted in Alaska 1993

COMMUNITY ACTIVITIES:

Committee Member, Annual Jewish Cultural Gala
Volunteer, Bean's Café
Volunteer, Aquarian Charter School
Volunteer, Camp Gan Israel

Antoinette Mallott
102 Cordova Street
Juneau, Alaska 99801
March 10, 2010

Chief Justice Dana Fabe
Alaska Supreme Court
303 K Street
Anchorage, Ak 99501-2084

Dear Chief Justice Fabe,

I am interested in serving on the Legislative Ethics Committee. Please review my resume and this letter of interest.

Currently, I reside in Juneau and Yakutat, Alaska, where we have our second home. I have lived in southeast Alaska for almost forty years. My involvement in the local native community is through my membership in Alaska Native Sisterhood and Alaska Native Brotherhood. My family has been involved in cultural and traditional events for many years. My husband and I have supported strong family values of responsibility, hard work ethics, kindness, ties to our ancestral lands and people and being a good person.

I am a registered Democrat and my voter registration is in Yakutat. I retired from teaching in 2003.

If you have any questions, please call me at the following numbers; Juneau: 586-6937, cell- 321-2022 (does not work in Yakutat) and Yakutat: 784-3074.

Thank you for your consideration.

Sincerely,

Antoinette Mallott
Antoinette Mallott

Resume
Antoinette Mallott

Residence:

102 Cordova Street
Juneau, Alaska 99801

Status:

Married: Byron I. Mallott Children: Anthony, Joseph and Benjamin

Date of Birth: October 27, 1947, Rampart, Alaska

Background:

I am an Alaskan Native and have spent my entire life in Alaska. I have been involved in education for the past thirty years, both as a teacher and parent. I strongly believe that it is imperative to develop and strengthen students' self-esteem and academic skills. It is equally important to establish a positive relationship with parents and support their involvement with their children's academic and social achievements.

My experience in the teaching profession included knowledge about the public laws of inclusion for students with learning, physical and emotional disabilities. I have worked with ESL (English Second Language) students and supported their rights to seek and obtain academic assistance in core subjects, such as reading, math and writing.

During my years of teaching at Gastineau Elementary School, I was on SCOT, a collaboration team composed of teachers, administrators and other support staff members. Our team met weekly to discuss learning and behavioral problems of students that classroom teachers were concerned about. Parents were requested to be present during these meetings. We were responsible for coming up with educational or behavioral plans to assist the students in their classrooms.

I was a Site Council member and facilitator for seven years at Gastineau. My duties included setting the monthly agendas, conducting the meetings, communication with parents, teachers and other members and carrying out the directions on decisions made for improving the school climate, safety of the students and staff and review and approval of curricula.

One of the many duties that a teacher has is writing academic and learning diagnostic reports for parents and administrators. I am confident that I possess the ability to organize, evaluate and present information effectively.

Education:

Bachelor of Elementary Education, University of Alaska, Fairbanks, 5/72
Master's in Elementary Education, University of Alaska, Juneau, 5/87

Professional Experiences:

2006 -2010 Care Coordinator for Catholic Community Services, Yakutat
1998-2003 Librarian and ESL teacher, Juneau
1990-1998 Classroom teacher, Juneau
1986-1990 Substitute teacher, Juneau
1982-1983 Chairperson for the Commissioner's Task Force on Native Achievement, Department of Education
1979-1980 3rd grade teacher, Yakutat
1978-1979 Headstart director and teacher, Yakutat
1977-1978 Resource coordinator, Indian Studies Program, Anchorage
1974-1976 2nd/3rd grade teacher, Yakutat
1972-1974 3rd grade teacher, Juneau
1970-1972 Home-School coordinator, State of Alaska Boarding Home Program, Fairbanks
1970 Summer flight attendant, TransWorld Airlines, Kansas City, Kansas
1968-1970 Travel agent, Roger's Travel Agency, Fairbanks



Official Business

Alaska State Legislature

House of Representatives


Office of the Chief Clerk

State Capitol, Room 216
Juneau, AK 99801-1182
Phone: (907) 465-3725
Fax: (907) 465-5334

MEMORANDUM

Date: March 22, 2010

To: Representative Ramras, Chair
Judiciary Committee

From: Suzi Lowell 
Chief Clerk

Subject: Chief Justice's Appointment

Speaker Chenault referred the following appointment by Chief Justice Walter L. Carpeneti to the Judiciary Committee:

Select Committee on Legislative Ethics
Antoinette Mallott

The committee report is attached for your use.

Attachment as noted

CONFIRMATION COMMITTEE REPORT

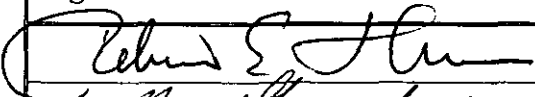
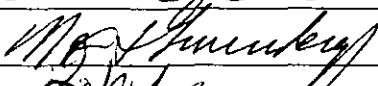

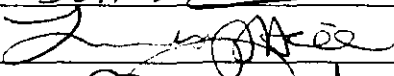
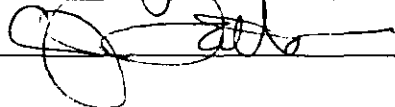
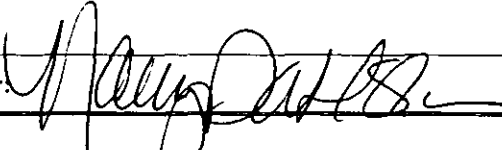
Action date: 3-31-2010

In accordance with AS 24.60.130, the Judiciary Committee has reviewed the qualifications of the following Chief Justice's appointee and recommends that this name be forwarded to the House for ratification:

Select Committee on Legislative Ethics

Antoinette Mallott

This does not reflect intent by any of the members to vote for or against this individual during any further sessions for the purposes of ratification.

Signature:	Printed Last Name
	HERRON
	Chumley
	LYNN
	Holmes
	Galt
Chair: 	Dahlstrom

Please return to the Chief Clerk's office.



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House of Representatives

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Fax: (907) 465-5334

REFERRAL FOR CONFIRMATION

Date Referred: February 3, 2010

Committee: Judiciary

Violent Crimes Compensation Board

Gerad G. Godfrey – Eagle River

Appointed: 2/19/2003

Reappointed: 4/6/2004 Reappointed: 3/1/2007

Reappointed: 3/1/2010 Term Expires: 3/1/2013

Action Date: 2/25/10
(Same date as on the accompanying signature page)

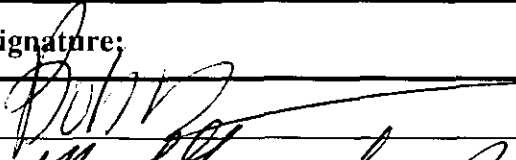
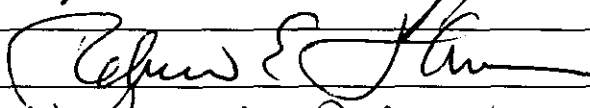

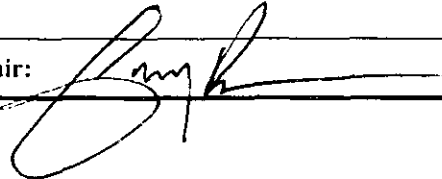
Note: Attach to a signature page and return to the Chief Clerk's office.

CONFIRMATION COMMITTEE REPORT

Action date: 2/29/10

The **Judiciary Committee** has reviewed the qualifications of the following Governor's appointee(s) as shown on the attached Referral for Confirmation form(s) and recommends that the name(s) be forwarded to a joint session for consideration:

This does not reflect intent by any of the members to vote for or against this individual during any further sessions for the purposes of confirmation.

Signature:	Printed Last Name
	LYNN Greenberg
	HERRON
	Holmes
Chair: 	KAMRAB -

Please attach appointee Referral for Confirmation form(s) and return to the Chief Clerk's office.

Gerad Godfrey
P.O. Box 770892
Eagle River, AK 99577

Hm. (907) 694-6154
Cel. (907) 229-8860

Objective:

Reappointment to serving on Alaska's Violent Crimes Compensation Board.

Strengths:

Diverse work experience throughout Alaska from laborer to administrative fields. Perpetually seeking to learn. Exceptional communicator both orally and written. Optimistic yet realistic. Creative while pragmatic. Highly motivated to help reduce the occurrence of violent crimes in Alaska and continue to aid victims through education, prevention and outreach.

Voluntary Civic Activity:

2003-Present – Appointed Chair of Alaska's Violent Crimes Compensation Board by last two Governors. Chairing a quasi-judicial board which adjudicates claims and distributes funds to innocent violent crime victims in Alaska while coordinating with full time staff in Juneau. Cultivating and nourishing fruitful relationships with local and state politicians as well as state commissioners in order to maintain board's statutory and fiscal homeostasis or augment it. Oversee preparation and submission of annual report to Alaska's legislators, select state commissioners and Governor.

2002-Present – Volunteer lobbyist for innocent victims of violent crimes. Annual trips to Juneau to meet with legislators, commissioners and the Governor's office on behalf of crime victims regarding public safety issues, legislation and fund allocation for crime victim services.

2007-Present – Created the Helping Hands Healing Hearts Program. A committee designed to consolidate the numerous victim advocacy groups in order to educate and assist the faith based community in dealing with violent crime victims by bridging the gap between faith based organizations and government/non-faith based organizations.

2002-2003 – Appointed by Mayor of Anchorage to Municipal Emergency 911 Oversight Task Force. Ad Hoc committee which explored and researched existing detriments, then potential remedies, to Anchorage's critically deficient emergency response system. Culminated with proposed upgrades and enhancements submitted to Mayor. Spoke on national television on topic.

Work Experience:

-2009-Present- Afognak Native Corporation, Legal Department, Anchorage, Alaska. Corporate Risk and Compliance. Work in the Corporation's legal department while engaging in all facets of corporate risk and compliance as it applies to all of the corporation's departments, field offices, property, projects, contracts and 6,000+ employees primarily employed in 8(a) fields of work.

Continued:

Work Experience continued:

- 2006-2009- Doyon Universal Services, Security Division, Port of Anchorage. Port Security.
Uphold and enforce United States Coast Guard Regulations governed by 33 CFR 105 as mandated by the Department of Homeland Security. Control Anchorage Port access points by land and water. Conduct patrols and video surveillance. Conduct vehicle/cargo screens random and for cause. Conduct declarations of security on all moored ships. Oversee security concerns of port expansion.

- 2001-2006- Doyon Universal Services, Security Division, Valdez, Alaska. Port Security.
Control Alyeska Marine Terminal facility access points. Patrol Alyeska property as well as the pipeline right of way. Run surveillance from land, air and water. Enforce APSC policies and procedures as well as USCG regulations. Function as field training officer. Function as step-up supervisor of 8 employees.

- 1998-2001- Regional Environmental Training Center, Fort Richardson, Alaska. Facilitator.
Facility oversight regarding security and integrity. Fulfill all requests of facility Executive Director. Accommodate instructors' needs to ensure they are adequately equipped and prepared to conduct their training at all times. Ensure continuity of all scheduled training.

- 1997-1998 - Guardsmark Security, Anchorage, Alaska. Assistant Administrator/H.R. Specialist.
Recruit and interview applicants. Conduct background checks. Hire and place new personnel at various contracts. Administer payroll and keep contracts fully staffed. Tend to logistical, technical and human resource issues of all account supervisors. Supervise all account supervisors. Deputy Administrator in overall management of all contracts within Alaska. Meet and maintain corporate headquarter goals and expectations.

- 1993-1997 - Nana/Marriott Catering Service, Prudhoe Bay, Alaska. (Seasonally/College)
Laborer/Prep Cook in industrial kitchens in Arctic Circle oilfield camps.

- 1985-1992 - Commercial Fisherman, Kodiak, Alaska. (Seasonally/Jr.High/High School/College)
Lived and worked on a 55 foot commercial fishing boat with 4 other crewmen. Skiffman then served as deck boss of crew.

Education:

- B.S. Criminal Justice/Counseling Psychology, University of Great Falls, 1996
Great Falls MT. Honors: Dean's List
- Alaska Department of Public Safety Training Academy, 1998
Sitka, AK.
- ETT Certification, 2001
Anchorage, AK.
- Public Agency Training Council NCJ First Line Supervisor Certificate 2005
Fairbanks, AK.
- 2006-Current Final Year Law Student, J.D of Law, Concord Law School of Kaplan University, Los Angeles, CA. Honors: Outstanding Performance Award-Contract Law, Passed California Baby Bar Exam first attempt

References:

Carl Marrs- Phone# 360-0279

Vicki Otte- Phone# 223-3330

Regina Chennault- Phone# 244-1689

Nancy Dahlstrom- Phone# 694-4929

Gerad Godfrey
P.O. Box 770892
Eagle River, AK 99577

Cell 229-8860
Home 694-6154
geradg@gmail.com