

HB

161

<TARGET><BILL>HB 161</BILL><SUBJECT>HB
161</SUBJECT><COMM>HJUD27</COMM></TARGET>

Alaska State Legislature

Rec'd. 2-27-12
ML

Chairman
State Affairs Committee



Member
Judiciary Committee
Energy Special Committee
Joint Armed Services Special Committee
Military and Veterans' Affairs Committee

Finance Subcommittees
Administration
Corrections
Military and Veterans' Affairs

A Communication From
REPRESENTATIVE BOB LYNN
District 31 Anchorage

E-Mail: Representative_Bob_Lynn@legis.state.ak.us

Session:
Alaska State Capitol #108
Juneau, AK 99801-1182

Phone: (907) 465-4931
Fax: (907) 465-4316
Toll Free: (800) 870-4391

Interim:
716 W. 4th Ave., #650
Anchorage, AK 99501-2133

Phone: (907) 269-0205
Fax: (907) 269-0207

February 27, 2012

To: Representative Carl Gatto, Chair
House Judiciary Committee

Fr: Representative Bob Lynn *BL*

Re: HB 161 Version 27-LS0555\A – Certain Candidate Info is Public Record

I respectfully request a hearing on HB 161 "Certain Candidate Info is Public Record" at your earliest convenience. Attached are the following documents:

- Bill History
- HB 161 Version A
- Sponsor Statement *updated*
- Hearing Minutes 2/3/2011
- Sample Candidacy Forms

The House State Affairs Committee heard and moved Version A last session. Any questions or concerns can be directed to my staffer, Nancy Manly at 465-2794 or nancy_manly@legis.state.ak.us.

Thank you in advance for your consideration.

Alaska State Legislature

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Sponsor Statement

HB 161

“An Act requiring that all information in a declaration of candidacy, letter of intent, or nominating petition...is open to public inspection.”

HB 161 makes the information on Division of Elections filing forms for partisan, “no-party,” and write-in candidates a matter of public record. If voters are going to evaluate candidates and make an informed choice, they must be allowed to confirm the candidate’s name, physical address, and other personal information on the declaration of candidacy. HB 161 makes this information public for all candidates for public office, regardless of the confidentiality preferences they indicated when registering to vote.

The Division of Elections testified on this bill that “there is no authority for the division to treat a candidate differently from any other voter in regard to having the right to make a residential address confidential.” Voters should enjoy any and all confidentiality afforded them by the law. Nothing in HB 161 would change that. Candidates for office, however, should be held to a higher standard of public scrutiny than the average voter.

Candidates for office are already required to disclose personal information above and beyond the average voter. HB 161 takes the common-sense next step and makes this personal information available to the public. I respectfully ask that you join me in supporting this change.

For more information, contact Nancy Manly at 465-2794 nancy_manly@legis.state.ak.us

ALASKA STATE LEGISLATURE
HOUSE STATE AFFAIRS STANDING COMMITTEE

February 3, 2011
8:05 a.m.

DRAFT

MEMBERS PRESENT

Representative Bob Lynn, Chair
Representative Wes Keller, Vice Chair
Representative Paul Seaton
Representative Peggy Wilson
Representative Max Gruenberg
Representative Pete Petersen
Representative Kyle Johansen

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

OVERVIEW(S): DIVISION OF ELECTIONS

WITNESS REGISTER

GAIL FENUMIAI, Executive Director
Division of Elections
Office of the Lieutenant Governor
Juneau, Alaska

POSITION STATEMENT: Presented an overview of the Division of Elections.

SARAH FELIX, Assistant Attorney General
Labor and State Affairs Section
Civil Division (Juneau)
Department of Law
Juneau, Alaska

POSITION STATEMENT: Answered questions during the Division of Elections overview.

9:38:37 AM

MS. FENUMIAI, in response to Chair Lynn, confirmed that voters have the right to keep their residence address confidential, as long as they are able to provide the division with a different mailing address. In response to a follow-up question, she stated her assumption that people who have been victims of domestic violence and police officers may not want others to know where they live.

9:42:30 AM

MS. FELIX noted that AS 15.07.195 gives the right to keep ones residential address confidential. In response to Representative Seaton, she said currently there is no authority for the division to treat a candidate differently from any other voter in regard to having the right to make a residential address confidential.

9:44:15 AM

MS. FELIX, in response to Representative Seaton, stated that the subject of a voter's residential address was not an issue that arose during Edgmon v. Moses.

Please Find the Following Blank Forms Attached:

Political Party Candidates Declaration of Candidacy (*AS 15.25.030*)

- U.S. Congress
- Governor or Lt. Governor
- State Senator or Representative

**"No-Party" Candidates Filing Notification and Nominating Petition Forms
(*AS 15.25.180*)**

- U.S. Congress
- Governor
- Lt. Governor
- State Senator or Representative

Write-In Candidate Letter of Intent (*AS 15.25.105*)

- U.S. Congress
- Governor or Lt. Governor
- State Senator or Representative

**STATE OF ALASKA DECLARATION OF CANDIDACY
U.S. CONGRESS**

Please check: My \$100 filing fee accompanies this Declaration of Candidacy
Please check: I acknowledge that I am responsible for contacting the Federal Election Commission for federal reporting requirements: 999 E St. NW, Washington, DC 20463

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law and declare myself to be a resident of Alaska and a candidate for the office of (check one):

_____ **UNITED STATES SENATOR** - or - _____ **UNITED STATES REPRESENTATIVE**

I request that my name be placed on the **2012 Primary Election** ballot. I am registered under and am a candidate of the _____ political party.

RESIDENCY INFORMATION

My current Alaska residence address is: _____ AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. I have been a resident of Alaska since ____/____/____.
(MM / DD /YY) (MM / DD /YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the ballot in the following manner:

(Last Name) (First Name) (MI) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this *Declaration of Candidacy* is true and complete, and that I meet the specific residency and citizenship requirements of this office. I further certify that I shall meet the age requirements upon taking the oath of office, if elected. I am not a candidate for any other office to be voted upon at the Primary election, nor am I a candidate for this office under any other *Declaration of Candidacy* or *Nominating Petition*. I also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of Elections in writing over my signature at least 48 days before the election.

Subscribed and sworn to before me this

_____ day of _____, 20_____.

(Signature of Notary Public)

My commission expires: _____

(Candidate's Signature)

(Home Phone)

(Work Phone)

To assist staff in verifying candidate/voter identification, please provide one of the following:

SSN, ADL, Voter # or DOB _____

NOTARY SEAL

**STATE OF ALASKA DECLARATION OF CANDIDACY
GOVERNOR or LIEUTENANT GOVERNOR**

Please check: ___ My \$100 filing fee accompanies this Declaration of Candidacy
Please check one: My **Financial Disclosure Statement** is (1) ___ Enclosed OR (2) ___ On file with the Alaska Public Offices Commission. **NOTE:** Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure they have a current *Public Officials Financial Disclosure Statement* on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law and declare myself to be a resident of Alaska and a candidate for the office of:

_____ **GOVERNOR** - or - _____ **LIEUTENANT GOVERNOR**

I request that my name be placed on the **August 24, 2010 Primary Election** ballot. I am registered under and am a candidate of the _____ political party.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. I have been a resident of Alaska since ____/____/____.
(MM / DD /YY) (MM / DD /YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the ballot in the following manner:

(Last Name) (First Name) (Mi) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this *Declaration of Candidacy* is true and complete, and that I meet the specific residency and citizenship requirements of this office. I further certify that I shall be at least 30 years of age on the first Monday in December following the election. I am not a candidate for any other office to be voted upon at the Primary election, nor am I a candidate for this office under any other *Declaration of Candidacy* or *Nominating Petition*. I also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of Elections in writing over my signature at least 48 days before the election.

Subscribed and sworn to before me this _____ day of _____, 20____.

(Signature of Notary Public)

My commission expires: _____

(Candidate's Signature)

(Home Phone) (Work Phone)

To assist staff in verifying candidate/voter identification, please provide one of the following:

SSN, ADL, Voter # or DOB _____

NOTARY SEAL

**STATE OF ALASKA DECLARATION OF CANDIDACY
STATE SENATOR or STATE REPRESENTATIVE**

Please check: My \$30 filing fee accompanies this Declaration of Candidacy

Please check one: My Financial Disclosure Statement is (1) Enclosed OR (2) On file with the Alaska Public Offices Commission. **NOTE:** Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure they have a current Public Officials (Non-incumbents) or Legislative (Incumbents) Financial Disclosure Statement on file.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter and declare myself to be a resident of Alaska and of the District for which I declare my candidacy for the office of (check one and write the district race):

STATE SENATOR for District _____ - or - **STATE REPRESENTATIVE** for District _____

I request that my name be placed on the **2012 Primary Election** ballot. I am registered under and am a candidate of the _____ political party.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. Previous address if you have lived at your current address less than one year:
(MM / DD / YY)

_____, AK _____
(Previous Residence Address) (City) (Zip)

I have been a resident of Alaska since ____/____/____, and a resident of the Election District filed for since ____/____/____.
(MM / DD / YY) (MM / DD / YY)

My mailing address is: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

_____, _____, _____, _____
(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the ballot in the following manner:

_____, _____, _____, _____
(Last Name) (First Name) (MI) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this *Declaration of Candidacy* is true and complete, and that I meet the specific residency and citizenship requirements of this office. If I am filing for State Representative, I further certify that I shall be at least 21 years of age on the first scheduled day of the first regular session of the legislature convened after the election. If I am filing for State Senate, I further certify that I shall be at least 25 years of age on the first scheduled day of the first regular session of the legislature convened after the election. I am not a candidate for any other office to be voted upon at the Primary election, nor am I a candidate for this office under any other *Declaration of Candidacy* or *Nominating Petition*. I also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of Elections in writing over my signature at least 48 days before the election.

Subscribed and sworn to before me this

_____ day of _____, 20____.

(Candidate's Signature)

(Signature of Notary Public)

(Home Phone)

(Work Phone)

My commission expires: _____

To assist staff in verifying candidate/voter identification, please provide one of the following:
SSN, ADL, Voter # or DOB _____

A25 (Rev. 02/08/11)

**STATE OF ALASKA FILING NOTIFICATION
NOMINATING PETITION CANDIDATE FOR U.S. CONGRESS**

Please check: I acknowledge that the Nominating Petition form and Subscribers pages are due by
5:00pm, August 24, 2010

Please check: I acknowledge that I am responsible for contacting the Federal Election Commission for
federal reporting requirements: 999 E St. NW, Washington, DC 20463

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law and declare myself to be a
resident of Alaska and a candidate by petition for the _____ political group (if any), for the office
of:

Check one: **UNITED STATES SENATOR** OR **UNITED STATES REPRESENTATIVE**

I will accept this nomination and request that my name be placed on the **November 2, 2010 General Election** ballot if
my petition is certified.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. I have been a resident of Alaska since ____/____/____.
(MM / DD /YY) (MM / DD /YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the General Election ballot in the following manner:

(Last Name) (First Name) (MI) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may
include in the candidate's name any nickname or familiar form of a proper name of the candidate.

[AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this Filing Notification is true and complete, and that I meet the specific
residency and citizenship requirements of this office. I further certify that I shall meet the age requirements upon taking
the oath of office, if elected. I am not a candidate for any other office to be voted upon at the Primary or General
election, nor am I a candidate for this office under any other Declaration of Candidacy or Nominating Petition. I also
acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of
Elections in writing over my signature at least 48 days before the General election. I will accept this nomination and will
serve if elected.

Subscribed and sworn to before me this

_____ day of _____, 20_____.

(Candidate's Signature)

(Signature of Notary Public)

(Home Phone)

(Work Phone)

My commission expires: _____

To assist staff in verifying candidate/voter identification,
please provide one of the following:

SSN, ADL, Voter # or DOB: _____

NOTARY SEAL

**STATE OF ALASKA FILING NOTIFICATION
NOMINATING PETITION CANDIDATE FOR GOVERNOR**

Please check: ___ I acknowledge that the Nominating Petition Form and Subscribers' pages must be filed by
5:00pm, August 24, 2010

Please check one: My **Financial Disclosure Statement** is (1) ___ Enclosed OR (2) ___ On file with the Alaska Public
Offices Commission. **NOTE:** Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure
they have a current *Public Officials Financial Disclosure Statement* on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law, and declare myself to be a
resident

of Alaska and a candidate by petition for the _____ political group (if any), for the office
of:

GOVERNOR

The name of the candidate running jointly with me for Lt. Governor is _____
[AS 15.25.180(a)(17)]

I will accept this nomination and request that my name be placed on the **November 2, 2010** General Election ballot if my
petition is certified.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. I have been a resident of Alaska since ____/____/____.
(MM / DD /YY) (MM / DD /YY)

My mailing address: _____, _____, _____, _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

_____, _____, _____, _____, _____
(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the General Election ballot in the following manner:

_____, _____, _____, _____, _____
(Last Name) (First Name) (MI) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may
include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this Filing Notification is true and complete, and that I meet the specific
residency and citizenship requirements of this office. I further certify that I shall be at least 30 years of age on the first
Monday in December following the election. I am not a candidate for any other office to be voted upon at the Primary or
General Election, nor am I a candidate for this office under any other Declaration of Candidacy or Nominating Petition. I
also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of
Elections in writing over my signature at least 48 days before the General election. I will accept this nomination and will
serve if elected.

Subscribed and sworn to before me this

_____ day of _____, 20_____.

(Signature of Notary Public)

My commission expires: _____

(Candidate's Signature)

(Home Phone)

(Work Phone)

To assist staff in verifying candidate/voter identification,
please provide one of the following:

SSN, ADL, Voter # or DOB: _____

NOTARY SEAL

**STATE OF ALASKA FILING NOTIFICATION
NOMINATING PETITION CANDIDATE FOR LIEUTENANT GOVERNOR**

Please check: ___ I acknowledge that the Nominating Petition Form and Subscribers' pages must be filed by
5:00pm, August 24, 2010

Please check one: My **Financial Disclosure Statement** is (1) ___ Enclosed OR (2) ___ On file with the Alaska Public
Offices Commission. **NOTE:** Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure
they have a current *Public Officials Financial Disclosure Statement* on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law, and declare myself to be a resident of
Alaska and a candidate by petition for the _____ political group (if any), for the office of:

LIEUTENANT GOVERNOR

The name of the candidate running jointly with me for Governor is _____
[AS 15.25.180(a)(17)]

I will accept this nomination and request that my name be placed on the **November 2, 2010 General Election** ballot if
my petition is certified.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. I have been a resident of Alaska since ____/____/____.
(MM / DD /YY) (MM / DD /YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the General Election ballot in the following manner:

(Last Name) (First Name) (MI) (*Nickname and/or Suffix)

*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may
include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this Filing Notification is true and complete, and that I meet the specific
residency and citizenship requirements of this office. I further certify that I shall be at least 30 years of age on the first
Monday in December following the election. I am not a candidate for any other office to be voted upon at the Primary or
General Election, nor am I a candidate for this office under any other Declaration of Candidacy or Nominating Petition. I
also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of
Elections in writing over my signature at least 48 days before the General election. I will accept this nomination and will
serve if elected.

Subscribed and sworn to before me this

_____ day of _____, 20_____.

(Signature of Notary Public)

My commission expires: _____

(Candidate's Signature)

(Home Phone)

(Work Phone)

To assist staff in verifying candidate/voter identification,
please provide one of the following:

SSN, ADL, Voter # or DOB: _____

NOTAR SEAL

**STATE OF ALASKA FILING NOTIFICATION
NOMINATING PETITION CANDIDATE FOR STATE SENATOR OR STATE REPRESENTATIVE**

Please check: I acknowledge that the Nominating Petition form and Subscribers' pages are due by **5:00pm, August 24, 2010**

Please check one: My **Financial Disclosure Statement** is (1) Enclosed OR (2) On file with the Alaska Public Offices Commission. **NOTE:** Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure they have a current Public Officials (Non-incumbents) or Legislative (Incumbents) Financial Disclosure Statement on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law and declare myself to be a resident of Alaska and candidate by petition for the _____ political group (if any), for the office of (check one and write district race):

STATE SENATOR for DISTRICT _____ OR **STATE REPRESENTATIVE** for DISTRICT _____

I will accept this nomination and request that my name be placed on the **November 2, 2010 General Election** ballot if my petition is certified.

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since ____/____/____. Previous address if you have lived at your current address less than one year:
(MM / DD / YY)

_____, AK _____
(Previous Residence Address) (City) (Zip)

I have been a resident of Alaska since ____/____/____, and a resident of the Election District filed for since ____/____/____.
(MM / DD / YY) (MM / DD / YY)

My mailing address is: _____
(Mailing Address) (City) (State) (Zip)

Mailing address and phone number for correspondence and the Division of Elections' web site listing:

_____, _____, _____, _____, _____
(Official Candidate Mailing Address) (City) (State) (Zip) (Phone)

I request that my name appear on the General Election ballot in the following manner:

_____, _____, _____, _____
(Last Name) (First Name) (MI) (*Nickname and/or Suffix)
*The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]

CERTIFICATION

I, the undersigned, certify that the information in this Filing Notification is true and complete, and that I meet the specific residency and citizenship requirements of this office. If I am filing for State Representative, I further certify that I shall be at least 21 years of age on the first scheduled day of the first regular session of the legislature convened after the election. If I am filing for State Senate, I further certify that I shall be at least 25 years of age on the first scheduled day of the first regular session of the legislature convened after the election. I am not a candidate for any other office to be voted upon at the Primary or General election, nor am I a candidate for this office under any other Declaration of Candidacy or Nominating Petition. I also acknowledge that should I choose to withdraw my candidacy, my withdrawal must be received by the Director of Elections in writing over my signature at least 48 days before the general election. I will accept this nomination and will serve if elected.

Subscribed and sworn to before me this

_____ day of _____, 20_____.

(Candidate's Signature)

(Signature of Notary Public)

_____, _____
(Home Phone) (Work Phone)

My commission expires: _____

To assist staff in verifying candidate/voter identification, please provide one of the following: Last 4 SSN, State ID #
SSN, ADL, Voter # or DOB: _____

**STATE OF ALASKA NOMINATING PETITION FORM
NOMINATING PETITION CANDIDATE FOR U.S CONGRESS**

We, the attached named subscribers, support the candidacy of

(Name of Candidate)

representing the _____ political group (if any)
(Name of political group if any, if none write "none")

for the office of (check one):

U.S. SENATOR

OR

U.S. REPRESENTATIVE

We request that our candidate's name be placed on the ballot for the November ____, 20__
General Election as a candidate by petition of the above named political group (if any).

The signatures supporting this candidate are attached. The candidate's Filing Notification form was filed by the June 1, 2010 deadline.

(Signature of Candidate or Contact Person Representing the Candidate)

(Date)

(Printed Name of Contact Person)

(Mailing Address for Contact Person)

(City)

(State)

(Zip Code)

(Email Address for Contact Person)

(Home Phone)

(Work Phone)

Note: Please attach all Subscribers' pages (signature pages) to this form.

DIVISION OF ELECTIONS - OFFICE USE ONLY

Number of signature pages attached _____

Approximate Number of signatures _____

Place of filing: DO RI RII Mat-Su RIII RIV

Received by: MAIL IN PERSON

Processed by: _____

**STATE OF ALASKA NOMINATING PETITION FORM
NOMINATING PETITION CANDIDATE FOR GOVERNOR**

We, the attached named subscribers, support the candidacy of

(Name of Candidate)

representing the _____ political group (if any)
(Name of political group if any, if none write "none")

for the office of:

GOVERNOR

We request that our candidate's name be placed on the ballot for the November ____, 20__
General Election as a candidate by petition of the above named political group (if any).

The signatures supporting this candidate are attached. The candidate's Filing Notification form was
filed by the June 1, 2010 deadline.

(Signature of Candidate or Contact Person Representing the Candidate)

(Date)

(Printed Name of Contact Person)

(Mailing Address for Contact Person)

(City)

(State)

(Zip Code)

(Email Address for Contact Person)

(Home Phone)

(Work Phone)

Note: Please attach all Subscribers' pages (signature pages) to this form.

DIVISION OF ELECTIONS - OFFICE USE ONLY

Number of signature pages attached _____

Approximate Number of signatures _____

Place of filing: DO RI RII Mat-Su RIII RIV

Received by: MAIL IN PERSON

Processed by: _____

**STATE OF ALASKA NOMINATING PETITION FORM
NOMINATING PETITION CANDIDATE FOR LIEUTENANT GOVERNOR**

We, the attached named subscribers, support the candidacy of

(Name of Candidate)

representing the _____ political group (if any)
(Name of political group if any, if none write "none")

for the office of:

LIEUTENANT GOVERNOR

We request that our candidate's name be placed on the ballot for the November ____, 20__
General Election as a candidate by petition of the above named political group (if any).

The signatures supporting this candidate are attached. The candidate's Filing Notification form was
filed by the June 1, 2010 deadline.

(Signature of Candidate or Contact Person Representing the Candidate)

(Date)

(Printed Name of Contact Person)

(Mailing Address for Contact Person)

(City)

(State)

(Zip Code)

(Email Address for Contact Person)

(Home Phone)

(Work Phone)

Note: Please attach all Subscribers' pages (signature pages) to this form.

DIVISION OF ELECTIONS - OFFICE USE ONLY

Number of signature pages attached _____

Approximate Number of signatures _____

Place of filing: DO RI RII Mat-Su RIII RIV

Received by: MAIL IN PERSON

Processed by: _____

**STATE OF ALASKA NOMINATING PETITION FORM
NOMINATING PETITION CANDIDATE FOR STATE SENATOR OR STATE REPRESENTATIVE**

We, the attached named subscribers, support the candidacy of

(Name of Candidate)

representing the _____ political group (if any)

(Name of political group if any, if none write "none")

for the office of (check one):

___ **STATE SENATOR** representing **DISTRICT** _____

OR

___ **STATE REPRESENTATIVE** representing **DISTRICT** _____

We request that our candidate's name be placed on the ballot for the November ____, 20__
General Election as a candidate by petition of the above named political group (if any).

The signatures supporting this candidate are attached. The candidate's Filing Notification form was filed by the June 1, 2010 deadline.

(Signature of Candidate or Contact Person Representing the Candidate) (Date)

(Printed Name of Contact Person)

(Mailing Address for Contact Person) (City) (State) (Zip Code)

(Email Address for Contact Person) (Home Phone) (Work Phone)

Note: Please attach all Subscribers' pages (signature pages) to this form.

DIVISION OF ELECTIONS - OFFICE USE ONLY

Number of signature pages attached _____ Approximate Number of signatures _____

Place of filing: DO RI RII Mat-Su RIII RIV Received by: MAIL IN PERSON

Processed by: _____

A22a (Rev. 1/21/09)

**STATE OF ALASKA LETTER OF INTENT
WRITE-IN CANDIDATES FOR U.S. CONGRESS**

Please check: I acknowledge that I am responsible for contacting the Federal Election Commission for federal reporting requirements: 999 E St., N.W., Washington, DC 20463

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law, a resident of Alaska, and a candidate for the office of (check one):

UNITED STATES SENATOR OR **UNITED STATES REPRESENTATIVE**

I am a write-in candidate for the **November 2, 2010 General Election** ballot.

I am registered under and am a candidate of the _____ political party **OR**
(Party Name)

I am a candidate of the _____ political group **OR** (Please Check) I am not affiliated
(Group Name) with a political group or party

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since _____, _____. I have been a resident of Alaska since _____, _____.
(MM/DD) (YY) (MM/DD) (YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

I am requesting voters to write my name as follows:

(Last Name) (First Name) (MI) (Nickname and/or Suffix)

CERTIFICATION

I, the undersigned, certify that the information in this *Letter of Intent* is true and complete, and that I meet the specific residency and citizenship requirements of this office. I further certify that I shall meet the age requirements upon taking the oath of office, if elected. I am not a candidate for any other office to be voted upon at the General Election, nor am I a candidate for this office under any other *Declaration of Candidacy* or *Nominating Petition*.

(Candidate's Signature)

(Date)

(Home Phone)

(Work Phone)

To assist staff in verifying candidate / voter identification, please provide one of the following:
SSN, ADL, Voter # or DOB: _____

**THE DIVISION OF ELECTIONS MUST RECEIVE THIS FORM NO LATER THAN THURSDAY, OCTOBER 28, 2010
RETURN THIS FORM TO: DIVISION OF ELECTIONS, PO BOX 110017, JUNEAU, AK 99811-0017**

**STATE OF ALASKA LETTER OF INTENT
WRITE-IN CANDIDATES FOR GOVERNOR AND LIEUTENANT GOVERNOR**

Candidate for **Governor** Check one: My **Financial Disclosure Statements** is (1) ___ Enclosed OR (2) ___ On file with APOC.
 Candidate for **Lt. Governor** Check one: My **Financial Disclosure Statements** is (1) ___ Enclosed OR (2) ___ On file with APOC.
NOTE: Candidates selecting option 2, are encouraged to contact the Alaska Public Offices Commission prior to filing to ensure they have a current Public Officials Financial Disclosure Statement on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, declare myself to be a qualified voter as required by law, a resident of Alaska, and candidate for the office of: **GOVERNOR**

I, _____, declare myself to be a qualified voter as required by law, a resident of Alaska, and candidate for the office of: **LIEUTENANT GOVERNOR**

We are write-in candidates for the **November 2, 2010 General Election** ballot.

We are registered under and are candidates of the _____ political party OR We are candidates of the _____ political group OR _____ (Please Check) We are not affiliated with any _____ political group or party.

(Group Name)

RESIDENCY INFORMATION – CANDIDATE FOR GOVERNOR

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since _____, _____. I have been a resident of Alaska since _____, _____.
(MM/DD) (YY) (MM/DD) (YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

RESIDENCY INFORMATION – CANDIDATE FOR LIEUTENANT GOVERNOR

My current Alaska residence address is: _____, AK _____
(Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since _____, _____. I have been a resident of Alaska since _____, _____.
(MM/DD) (YY) (MM/DD) (YY)

My mailing address: _____
(Mailing Address) (City) (State) (Zip)

CONTACT INFORMATION

Contact's Name: _____ Contact's Phone Number _____

Mailing address: _____
(Mailing Address) (City) (State) (Zip)

We are requesting voters to write our names as follows:

(For Governor - Last Name) (First Name) (MI) (Nickname and/or Suffix)

(For Lt. Governor - Last Name) (First Name) (MI) (Nickname and/or Suffix)

CERTIFICATION

We, the undersigned, certify that the information in this *Letter of Intent* is true and complete, and that we meet the specific residency and citizenship requirements of this office. We further certify that we shall be at least 30 years of age on the first Monday in December following the election. We are not candidates for any other office to be voted upon at the General Election in Alaska, nor are we candidates for this office under any other means of declaring candidacy.

Please provide one of the following for candidate/voter identification:

(Candidate for Governor Signature) (Date) (Home Phone) (Work Phone) (SSN#, ADL#, Voter# or DOB)

(Candidate for Lt. Governor Signature) (Date) (Home Phone) (Work Phone) (SSN#, ADL#, Voter# or DOB)

THE DIVISION OF ELECTIONS MUST RECEIVE THIS FORM NO LATER THAN THURSDAY, OCTOBER 28, 2010
 RETURN THIS FORM TO: DIVISION OF ELECTIONS, PO BOX 110017, JUNEAU AK 99811-0017

A35 (12/12/07)

**STATE OF ALASKA LETTER OF INTENT
WRITE-IN CANDIDATES FOR STATE SENATOR or STATE REPRESENTATIVE**

Check one: My **Financial Disclosure Statement** is (1) _____ Enclosed OR (2) _____ On file with the Alaska Public Offices Commission
NOTE: Candidates selecting option 2, are encouraged to contact APOC prior to filing to ensure they have a current *Public Officials (Non-incumbents) or Legislative (Incumbents) Financial Disclosure Statement* on file with APOC.

GENERAL INFORMATION (Please print or type)

I, _____, am a qualified voter as required by law and declare myself to be a resident of Alaska and of the District for which I declare my candidacy for the office of (check one):

___ STATE SENATOR for District ___ - OR - ___ STATE REPRESENTATIVE for District ___

I am a write-in candidate for the **November 2, 2010 General Election** ballot.

I am registered under and am a candidate of the _____ political party **OR**
 (Party Name)

I am a candidate of the _____ political group **OR** _____ (Please Check) I am not affiliated
 (Group Name) with a political group or party

RESIDENCY INFORMATION

My current Alaska residence address is: _____, AK _____
 (Use street #, mile post, or other physical location description) (City) (Zip)

I have lived at this address since _____
 (MM/DD) (YY)

Previous address if you have lived at your current address less than one year:

_____, Alaska _____
 (Previous Residence Address) (City) (Zip)

I have been a resident of Alaska since _____, _____, and a resident of the Election District for which I am seeking office since:
 (MM/DD) (YY)

My mailing address is: _____
 (MM/DD) (Year) (Mailing Address) (City) (State) (Zip)

I am requesting voters to write my name as follows:

 (Last Name) (First Name) (MI) (Nickname and/or Suffix)

CERTIFICATION

I, the undersigned, certify that the information in this *Letter of Intent* is true and complete, and that I meet the specific residency and citizenship requirements of this office. If I am filing for State Representative, I further certify that I shall be at least 21 years of age on the first scheduled day of the first regular session of the legislature convened after the election. If I am filing for State Senate, I further certify that I shall be at least 25 years of age on the first scheduled day of the first regular session of the legislature convened after the election. I am not a candidate for any other office to be voted upon at the General Election, nor am I a candidate for this office under any other *Declaration of Candidacy* or *Nominating Petition*.

 (Candidate's Signature)

 (Date)

 (Home Phone)

 (Work Phone)

To assist staff in verifying candidate / voter identification please provide one of the following:
 SSN, ADL, Voter # or DOB: _____

THE DIVISION OF ELECTIONS MUST RECEIVE THIS FORM NO LATER THAN THURSDAY, OCTOBER 28, 2010
 RETURN THIS FORM TO: DIVISION OF ELECTIONS, PO BOX 110017, JUNEAU, AK 99811-0017

Alaska State Legislature

**Chairman**

State Affairs Committee

Member

Judiciary Committee
Energy Special Committee
Joint Armed Services Special Committee
Military and Veterans' Affairs Committee

Finance Subcommittees

Administration
Corrections
Military and Veterans' Affairs

Session:
Alaska State Capitol #108
Juneau, AK 99801-1182

Phone: (907) 465-4931
Fax: (907) 465-4316
Toll Free: (800) 870-4391

Interim:

716 W. 4th Ave., #650
Anchorage, AK 99501-2133

Phone: (907) 269-0205
Fax: (907) 269-0207

A Communication From
REPRESENTATIVE BOB LYNN
District 31 Anchorage

E-Mail: Representative_Bob_Lynn@legis.state.ak.us
"Bob Lynn's Alaska Blog" RepBobLynnBlog.com

March 10, 2011

To: Representative Carl Gatto, Chair
House Judiciary Committee

Fr: Representative Bob Lynn

Re: HB 161 (Version 27-LS0555\A) "Making certain candidate information public"



I am requesting a hearing for HB 161, "*An Act requiring that all information in a declaration of candidacy...is open to public inspection*" at your earliest convenience.

I have attached supporting documentation.

The House State Affairs Committee has heard the bill, and moved HB 161 out of committee with a unanimous "do pass" recommendation.

Any questions or concerns can be directed to my staffer, Thomas Reiker, at 465-4965 or thomas_reiker@legis.state.ak.us.

Thank you in advance for your consideration.

FISCAL NOTE

STATE OF ALASKA
2011 LEGISLATIVE SESSION

Fiscal Note Number _____
 Bill Version HB 161
 () Publish Date _____

Identifier (file name) HB161-OOG-DOE-3-3-11 Dept. Affected Office of the Governor
 Title "An Act requiring that all information in a declaration of Appropriation Elections
candidacy, letter of intent, ... is open to public inspection..." Allocation Elections
 Sponsor Representative Lynn
 Requester House State Affairs Committee OMB Component Number 21

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2012	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
OPERATING EXPENDITURES								
Personal Services								
Travel								
Services								
Commodities								
Capital Outlay								
Grants								
Miscellaneous								
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
-----------------------------	--	--	--	--	--	--	--	--

CHANGE IN REVENUES								
---------------------------	--	--	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other (please identify)								
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2011) cost _____

POSITIONS

Full-time								
Part-time								
Temporary								

Why this fiscal note differs from previous version (if initial version, please note as such)

Prepared by Gail Fenumiai, Director
 Division Division of Elections
 Approved by Linda Perez, Administrative Director
Office of the Governor

Phone 465-2644
 Date/Time 3/3/2011, 10:08am
 Date 3/3/2011

FISCAL NOTE

STATE OF ALASKA
2011 LEGISLATIVE SESSION

BILL NO. HB 161

Analysis

This legislation has no fiscal impact for the Division of Elections.

Alaska State Legislature



Chairman

State Affairs Committee

Member

Judiciary Committee
Energy Special Committee
Joint Armed Services Special Committee
Military and Veterans' Affairs Committee

Finance Subcommittees

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Fax: (907) 269-0207

A Communication From
REPRESENTATIVE BOB LYNN
District 31 Anchorage

E-Mail: Representative_Bob_Lynn@legis.state.ak.us
"Bob Lynn's Alaska Blog" RepBobLynnBlog.com

Sponsor Statement

HB 161

"An Act requiring that all information in a declaration of candidacy, letter of intent, or nominating petition...is open to public inspection."

HB 161 makes the information on Division of Elections filing forms for partisan, "no-party," and write-in candidates a matter of public record. If voters are going to evaluate candidates and make an informed choice, they must be allowed to confirm the candidate's name, physical address, and other personal information on the declaration of candidacy. HB 161 makes this information public for all candidates for public office, regardless of the confidentiality preferences they indicated when registering to vote.

In a recent House State Affairs Committee hearing, the Division of Elections testified that "there is no authority for the division to treat a candidate differently from any other voter in regard to having the right to make a residential address confidential." Voters should enjoy any and all confidentiality afforded them by the law. Nothing in HB 161 would change that. Candidates for office, however, should be held to a higher standard of public scrutiny than the average voter.

Candidates for office are already required to disclose personal information above and beyond the average voter. HB 161 takes the common-sense next step and makes this personal information available to the public. I respectfully ask that you join me in supporting this change.

For more information, contact **Thomas Reiker** at 907-465-4965 or thomas_reiker@legis.state.ak.us