

SCOMM

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STATE OF ALASKA
1992 LEGISLATIVE SESSION

BILL NO. 374

Revision Date: _____
Title: Eligibility for a PFD
Sponsor: Martin, B. Davis
Requestor: Military and Veterans Affairs

Agency Affected: Revenue
BRU: Permanent Fund Dividend Division
Components: Permanent Fund Dividend
Division
COMPONENT SERIAL NO. 9 8 1

EXPENDITURES/REVENUES: (Thousands of Dollars)

	FY 93	FY 94	FY 95	FY 96	FY 97	FY 98
OPERATING						
PERSONAL SERVICES	-0-	-0-	-0-	-0-	-0-	-0-
TRAVEL	-0-	-0-	-0-	-0-	-0-	-0-
CONTRACTUAL	-0-	-0-	-0-	-0-	-0-	-0-
SUPPLIES	-0-	-0-	-0-	-0-	-0-	-0-
EQUIPMENT	-0-	-0-	-0-	-0-	-0-	-0-
LANDS & STRUCTURES	-0-	-0-	-0-	-0-	-0-	-0-
GRANTS, CLAIMS	-0-	-0-	-0-	-0-	-0-	-0-
MISCELLANEOUS	-0-	-0-	-0-	-0-	-0-	-0-
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
REVENUE	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING: (Thousands of Dollars)

GENERAL FUND	-0-	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS	-0-	-0-	-0-	-0-	-0-	-0-
OTHER	-0-	-0-	-0-	-0-	-0-	-0-
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME	-0-	-0-	-0-	-0-	-0-	-0-
TEMPORARY	-0-	-0-	-0-	-0-	-0-	-0-

Estimate of current year impact None.

ANALYSIS: None necessary.

Prepared By: Thomas C. Williams
Division: Permanent Fund Dividend Division

Phone: 465-2323
Date: January 22, 1992

Approved by Commissioner: James R. Sullivan
Agency: Revenue

Date: 1/24/92

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).

page 1 of 1

SUMMARY of HOUSE BILL 374

House Bill 374 redefines the state resident statutes in the Permanent Fund Dividend program. Reference to AS 01.10.055, which defines state resident for state programs, is added into AS 43.23.095 (8) and the intent to remain clause under the same citation is removed. A zero fiscal note is attached. Information provided by the bill sponsor, Representative Martin, is included in your packets.

DIVISION OF LEGAL SERVICES

LEGISLATIVE AFFAIRS AGENCY STATE OF ALASKA

(907) 465-3867 or 465-2450
FAX (907) 465-2029
Mail Stop 3101

240 Main Street, Suite 500
Juneau, Alaska 99801-2101

MEMORANDUM

December 3, 1991

SUBJECT: Qualifications for Permanent Fund Dividends (Work Order No. 7-LS1664)

TO: Representative Max Gruenberg

FROM: Tamara Brandt Cook
Director *TBC*

For purposes of determining eligibility for a permanent fund dividend, state resident is defined to include two elements: (1) physical presence in the state or absence only for reasons listed in the statute; and (2) the intent to remain permanently in the state. You have provided me with two hypothetical situations and asked whether the individual described in each situation qualifies for a dividend under applicable statutes and regulations. You have asked me to assume for each situation that, other than the question of residency, all other requirements for qualification (timely, application, physical presence under AS 43.23.005(a)(3), etc.) have been satisfied.

HYPOTHETICAL 1 - An individual who moves to the state but is not originally from Alaska provides substantial evidence of state residency (voter registration, driver's license, vehicle registration, proof of permanent abode in the state, sworn statement of intent to remain permanently, etc.), no evidence exists to suggest that the individual has claimed residency or the benefits of residency in another state, the individual is physically present, the individual is married to a non-resident member of the military who is also physically present.

It is my opinion that the individual qualifies as a resident under state statute and regulation because the element of physical presence is satisfied and, balancing all the evidence of intent to remain against the single fact of marriage to a non-resident, together with the fact that no evidence of residency in another state exists, it appears that the element of intent to remain permanently is also satisfied. 15 AAC 23.655(b) provides

An individual's intent to remain permanently in the state, or to return permanently to the state, is based on the totality of the relevant circumstances.

While I recognize that the intent of the individual to remain permanently in the state is necessarily subjective, something that only the individual can know with certainty, the law is filled with many instances in which intent is a necessary element, to be determined as a factual matter based upon extrinsic evidence. In this hypothetical situation the weight of extrinsic evidence supports a finding of the intent to remain. And I would observe that only a present intent to remain permanently appears to be required as an element of residency, so the fact that an individual might later change his or her mind and leave the state, whether with or without a spouse, while relevant to the issue of continuing residency as to future dividend applications, has little bearing on the issue of the validity of past dividend applications.

The Department of Revenue would, apparently, reach the opposite result under this hypothetical. It has adopted a policy that provides in part:

The PFD Division presumes that a non-resident who moves to Alaska with a non-resident spouse intends to accompany their non-resident spouse when that spouse departs Alaska at some future time. An individual who upon moving to Alaska takes steps to establish Alaska residency is presumed to not be eligible for a permanent fund dividend until such time as their spouse also takes steps to establish Alaska residency. ("Alaska Department of Revenue Permanent Fund Dividend Division Non-resident Spouse Policy, As of November 15, 1991")

If this policy is applied so that the presumption of non-residency cannot be refuted no matter how strong the evidence of residency is, the policy probably violates 15 AAC 23.655(b) which requires that a determination of intent to remain permanently in the state be based on "the totality of the relevant circumstances." I also note that the policy is invalid unless adopted as a regulation. (AS 43.23.015(a); AS 44.62.-640(a)(3); Kenai Peninsula Fisherman's Coop. Assn. v. State, 628 P.2d 897 (Alaska 1981); Gilbert v. Department of Fish and Game, 803 P.2d 391 (Alaska 1990))

HYPOTHETICAL 2 - All facts remain the same as those under the first hypothetical, except the element of physical presence. The individual leaves the state in order to remain with a non-state resident spouse who is transferred out of state by the military.

The individual would not qualify as a resident for failure to meet the physical presence requirement under 15 AAC 23.665(l) which states in part

Absence from the state by a spouse, child, or other dependent of an individual state resident who is absent for reasons allowed by (a)-(j) of this section is an allowable absence, if the spouse, child, or dependent was a resident immedi-

ately before departure and has not established residency elsewhere.
(Emphasis added)

However, it appears to me that the regulation might be susceptible to challenge, although I could not predict the outcome of such a challenge. Clearly, if the regulation were held invalid, the individual in hypothetical 2 might well qualify as a resident.

It could be argued that the regulation is narrower than the statute with respect to allowable absences, and that, as such, it invalidly modifies the statute. AS 43.23.095(8) provides that an individual may be absent from the state, "for the following reasons" and it lists "military service" as one of the reasons. There is no specific requirement that, for the reason to apply the individual must, himself, be in the military or that the person in the military be a resident. Perhaps, it could be argued that the statute includes the spouse or dependent of a person in military service because, as a practical matter, when a close family member is transferred by the military the spouse and dependents leave because of military service, albeit the service of another family member.

In my opinion a stronger attack on the regulation would be one based on equal protection. The regulation draws a distinction between similarly situated individuals married to state residents in the military and those married to non-state residents in the military. A court might find that this one difference is not tailored closely enough to the goal of distinguishing between bone fide residents and non-residents to survive equal protection scrutiny.

TBC:gc
91-423.glc

DIVISION OF LEGAL SERVICES

LEGISLATIVE AFFAIRS AGENCY STATE OF ALASKA

(907) 465-3867 or 465-2450
FAX (907) 465-2029
Mail Stop 3101

240 Main Street, Suite 500
Juneau, Alaska 99801-2101

MEMORANDUM

November 27, 1991

SUBJECT: Qualifications for Permanent Fund Dividends (Work Order No. 7-LS1649)

TO: Representative Terry Martin

FROM: Tamara Brandt Cook *TBC*
Director

Here is the draft you requested eliminating the requirement of intent to remain permanently in the state in the definition of "resident" for purposes of the permanent fund dividend program. Note that the practical effect of this change is to impose only a physical presence requirement (with absences permitted for reasons listed in statute) in order for an individual to qualify for a dividend.

Since the residency statute in Title I generally applicable to all titles could be held to apply to the permanent fund program to the extent it not directly in conflict with the definition of resident under that program, I have in this draft added a specific provision making AS 01.10.055 inapplicable. Under (a) of that statute there is a requirement of intent to remain in the state indefinitely, which I understand you would not want to have applied to the permanent fund program. However, there may be some element of that statute (check (b) and (c)) that you would like to keep. Take a look and let me know if you would like changes to this draft.

You have asked whether it is proper to include in a residency requirement the notion that a person intend to remain permanently in the state. Most definitions of resident (when that word is used to mean domicile) do include an intent to remain permanently or indefinitely. Black's Law Dictionary defines "legal residence" as "Actual residence at a place coupled with intent to remain." Under the common law for purposes of determining whether a court has jurisdiction based on the residency or place of domicile of one or more parties the court requires physical presence plus

Representative Terry Martin
November 27, 1991
Page 2

an intent to remain permanently. (Perito v. Perito, 756 P.2d 895 (Alaska 1988)) As previously mentioned, AS 01.10.055, applicable to all the statutes unless a more specific provision controls, includes the requirement of intent to remain in the state indefinitely as an element of residency.

TBC:gc
91-415.glc

Enclosure

Alaska State Legislature

Legislative Research Agency



130 Seward Street, Suite 218
Juneau, Alaska 99801-2196

Phone: (907) 465-3991
Fax: (907) 463-3351

January 17, 1992

MEMORANDUM

TO: Representative Terry Martin

FROM: Carol R. Vandor *CRV*
Legislative Analyst

RE: PERS and TRS Retirees Residing Outside Alaska
Research Request 92.114

You asked how many Public Employees' Retirement System (PERS) and Teachers' Retirement System (TRS) members have retired since 1982, and how many of these retirees are residing outside Alaska.

Between January 1, 1982 and January 1, 1992, 6,458 members have retired from PERS and 2,487 members have retired from TRS (8,945 total members).¹

Fifty-nine percent of all PERS and TRS retirees receive a cost-of-living allowance (COLA). In order to receive a COLA, a retiree must reside in Alaska. If we assume that this proportion fairly estimates those of the 1982-to-present group, then since January 1, 1982, approximately 3,810 PERS retirees and 1,467 TRS retirees (5,277 total) have remained in Alaska and approximately 2,648 PERS retirees and 1,020 TRS retirees have left Alaska (3,668 total).

I hope this information is useful to you. If we may be of further assistance, please contact this office.

¹These numbers do not take into account members' deaths; therefore, they do not reflect the number of members who have retired since January 1, 1982 who are receiving annuities.

1982 ALASKA PERMANENT FUND DIVIDEND APPLICATION

This application may be used by all eligible residents who are 18 years of age or older; or if less than 18 years of age, are legally emancipated minors. Please type or print neatly. YOU MUST USE THE SEPARATE FORM 04-100A TO FILE ON BEHALF OF ANOTHER ADULT, AND FORM 04-100C TO FILE ON BEHALF OF A CHILD.

MAIL YOUR COMPLETED AND SIGNED APPLICATION ON OR BEFORE OCTOBER 15, 1982

TO: Alaska Department of Revenue
Pouch SR
Juneau, Alaska 99811

ALASKA RESIDENT DEFINED

To be an Alaska resident you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, demonstrate at all times during your absence an intent to return to Alaska and remain permanently, and be absent for at least one of the allowable reasons as stated in the instructions.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

Yes No

- ☐ ☐ A. I have been an Alaska resident for six consecutive months immediately preceding the date of this application; and
- ☐ ☐ B. I am, and intend to remain, an Alaska resident at the time I file this application.

You are eligible to apply for an Alaska Permanent Fund Dividend payment only if you answered yes to both statements.

2. AUTHORIZATION TO FILE. Please check the box beside any statement below that applies to you.

- ☐ A. Alaska resident and U.S. citizen
- ☐ B. Alaska resident alien (attach Federal Form I-151 or I-551)
- ☐ C. Refugee residing in Alaska (attach Federal Form I-94, I-151 or I-551)
- ☐ D. 18 years of age or older
- ☐ E. Under 18 years of age but legally emancipated by: (check one)
- ☐ 1. Marriage (attach copy of marriage certificate)
- ☐ 2. Other (attach copy of court order)

3. My present Alaska residency began: (month, day and year)

4. Date of this application:

5. My date of birth: (mo, day, yr)

6. I was born in Alaska.

Yes ☐ No ☐

7. My Social Security Number:

8. My daytime telephone no.

9. My First Name

Middle Initial

Last Name

Mailing Address

City, State and Zip Code

10. Spouse's First Name

Middle Initial

Last Name

11. Spouse's Soc. Sec. No.

12. Spouse is an Alaska resident.
Yes ☐ No ☐

13. Please check the box below that best describes your occupation.

- | | |
|--|--|
| ☐ A. Agriculture, forestry or mining | ☐ I. Federal government |
| ☐ B. Fishing or fisheries business | ☐ J. Services; i.e. personal, legal, business, repair, health, etc. |
| ☐ C. Construction | ☐ K. Military; list Home of Residency: _____ |
| ☐ D. Manufacturing | ☐ L. Other: (describe) _____ |
| ☐ E. Transportation or public utilities | ☐ M. Unemployed |
| ☐ F. Wholesale or retail trade | |
| ☐ G. Finance, insurance or real estate | |
| ☐ H. Local or state government | |

14. Name of my current employer:

Address:

15. Other name(s) I used while an Alaska resident:

16. My home is located at: (number, street and city, or physical location)

17. Will your job require that you be transferred to another state or country at some point in the future?

☐ Yes ☐ No

18. **PROOFS OF ELIGIBILITY.** Please provide the following information as it applies to you for the six months immediately preceding the date of this application.

- ☐ A. Registered to vote.
Name of State: _____
- ☐ B. Educational tuition paid and/or benefits claimed; enter "resident" or "non-resident": _____
Name of college, university, etc. _____
City and State: _____
- ☐ C. Fishing, hunting or trapping license; enter "resident" or "non-resident": _____
State: _____ Lic. No. _____
- ☐ D. Commercial fishing license; enter "resident" or "non-resident": _____
State: _____ Lic. No. _____
- ☐ E. Limited entry permit; enter "resident" or "non-resident": _____
State: _____ Lic. No. _____
- ☐ F. Driver's license: Lic. No. _____
Name of State: _____
- ☐ G. Motor vehicle reg. 1982 license plate number(s):
Vehicle 1: _____ Vehicle 2: _____
State: _____ State: _____
- ☐ H. Bank account.
Name of bank: _____
City and State: _____
- ☐ I. Receiving public assistance such as food stamps, AFDC, medical aid, etc.
Case File No. _____
- ☐ J. Other evidence of residency (list): _____

19. EXPLANATION OF ABSENCES

Are you currently living outside of Alaska? ☐ Yes ☐ No

If yes, have you been absent from Alaska for more than five years? ☐ Yes ☐ No

Remember that you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g. to vote in a state or local election, to qualify for resident tuition at a college or university, etc.), then you have terminated your eligibility for an Alaska permanent fund dividend.

During the six months immediately preceding the date of this application, were you out of Alaska:

For more than 60 consecutive days? ☐ Yes ☐ No

For more than 90 total days? ☐ Yes ☐ No

For more than 180 total days? ☐ Yes ☐ No

NOTE: Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.

If you checked "yes" to any question above, please explain the reason(s) for your absence(s) in the appropriate categories below. If you checked "no" to all questions, go on to lines 20 and 21.

☒ A. COLLEGE, SCHOOL OR UNIVERSITY

Name and Location of School	Did you pay resident tuition?		Dates of Attendance	Degree Sought or Other Purpose
	YES	NO		
	☐	☐		

☐ B. MILITARY

Branch of Service		Serial Number
Date(s) of Departure - Date(s) of Return		
Home of Residency		Date of Enlistment or Last Reenlistment

☐ C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN

Date(s) of Departure - Date(s) of Return	
Name of Physician	City and State in Which You Were Treated

☐ D. BUSINESS

Employer's Name
Date(s) of Departure - Date(s) of Return

☐ E. VACATION

Date(s) of Departure - Date(s) of Return
--

☐ F. OUT OF STATE AS SPOUSE OR DEPENDENT OF PERSON WITH ALLOWABLE ABSENCE

Check the category of the other person's absence and provide the requested information for that person.

Name, Social Security Number, and Address of Person You Were With

☐ G. OTHER REASONS

Date(s) of Departure - Date(s) of Return
Please explain reasons (attach additional pages as necessary)

20. State the names, addresses and phone numbers of two or more Alaska residents who can verify your Alaska residency.

21. SIGNATURE. IT IS IMPORTANT THAT YOU CAREFULLY READ THE FOLLOWING STATEMENT BEFORE SIGNING.

I certify that I am now and intend to remain an Alaska resident at the time I file this application and that I have been a state resident for at least six consecutive months immediately preceding the date of this application. I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense and that if convicted I will forfeit future permanent fund dividends and that I must repay all permanent fund dividends that have been paid to me. I also understand that this penalty is in addition to any criminal penalties imposed.

SIGN HERE

Signature

DUE DATE: OCTOBER 15, 1982

1983 ALASKA PERMANENT FUND DIVIDEND ADULT APPLICATION



This application must be used by all eligible residents filing on their own behalf who are 18 years of age or older; or who are legally emancipated minors if less than 18 years of age. Please type or print neatly. **YOU MUST USE THE SEPARATE FORM 04-100 B TO FILE ON BEHALF OF ANOTHER ADULT, AND FORM 04-100 C TO FILE ON BEHALF OF A CHILD.**

DUE DATE: JUNE 30, 1983

PERMANENT FUND DIVIDEND RESIDENCY DEFINED

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, demonstrate at all times during your absence an intent to return to Alaska and remain permanently, and be absent for at least one of the allowable reasons as stated in the instructions.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

YES NO

☐ ☐

A. I was an Alaska resident during the period October 3, 1982 through March 31, 1983; and

☐ ☐

B. I am, and intend to remain, an Alaska resident at the time I file this application.

You are eligible to apply for an Alaska Permanent Fund Dividend payment only if you answered yes to both statements.

2. I was born in Alaska.

Yes ☐

No ☐

3. My date of birth:

MONTH

DAY

YEAR

4. My Social Security Number:

My daytime telephone no.

5. My First Name

Middle Initial

Last Name

Mailing Address

City, State and Zip Code

6. My home is physically located at: (number, street and city, or physical location)

7. ADULT'S STATUS. Please check the appropriate box in both categories A and B.

A. I have the following residency status:

☐

1. Alaska resident and U.S. citizen

☐

2. Alaska resident alien

(Enter Alien Registration No. A-_____)

☐

3. Refugee or asylee residing in Alaska

(Enter Alien Registration No. A-_____)

B. I have adult status because I am:

☐

1. 18 years of age or older

☐

2. Under 18 years of age but legally emancipated by: (check one)

☐

a. Marriage (attach copy of marriage certificate)

☐

b. Other (attach copy of court order)

For Office Use Only

8. HOUSEHOLD INFORMATION. To help us account for the total number of applications being submitted from your household at this time, please complete the following:

_____ Number of adult applications (include this one)

_____ Number of children's applications

_____ Total applications submitted from your household

Note to Parents and Guardians: If more than one person is eligible to apply on behalf of a child, for example both the father and the mother, the couple should choose which one will apply. That person should be listed in Section A on the child's application.

Household Filing: Please attach together all the applications from your household and submit as one package. File the completed and signed applications on or before June 30, 1983. Applications filed after that date will be rejected.

Receipt of Applications: When processing has begun on your 1983 application, you will be notified by mail. If you need to know before then that your application has been received, you may send it by U.S. certified mail with a return receipt requested. Dividend checks will be issued beginning October 1983.

**SEND TO: Alaska Department of Revenue
Pouch SR
Juneau, Alaska 99811**

9. Name of my current employer:

Address:

Employer's telephone number:

Date employment began:

My occupation: (Note: If you or your spouse are a member of the U.S. armed forces or U.S. Coast Guard, then you must attach a copy of that person's Leave and Earnings Statement for September 1982.)

10. ABSENCES. Please answer "yes" or "no" to each of the following questions.

During the period October 3, 1982 through March 31, 1983, were you out of Alaska:

YES NO

☐ ☐

A. For more than 60 consecutive days?

For Office Use Only

☐ ☐

B. For more than 90 total days?

☐ ☐

C. For the entire period?

☐ ☐

D. Are you currently living outside Alaska?

☐ ☐

E. If yes, have you been absent from Alaska for more than five years?

If you answered "yes" to any question above, you must explain the reason(s) for your absence(s) in section 11 on the back of this page. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.

11. EXPLANATION OF ABSENCES. Did you answer "yes" to any question in section 10?	Remember that you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g. to vote in a state or local election, to qualify for resident tuition at a college or university, etc.), then you have terminated your eligibility for an Alaska permanent fund dividend.
YES If the answer is "yes", please explain the reason(s) for your absence(s) in the appropriate categories below. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.	
☐ NO If the answer is "no", go on to section 12.	

☐ A. OUT OF STATE AS SPOUSE OR DEPENDENT OF PERSON WITH ALLOWABLE ABSENCE If you check this box you must also check the category of the other person's absence and provide the requested information for that person.			
Name, Social Security Number, and Address of Person You Were With			
☐ B. MILITARY	Branch of Service	Serial Number	Home of Residency - Attach L.E.S. for September 1982
Date(s) of Departure - Date(s) of Return		Date of Enlistment or Last Reenlistment	
☐ C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN			Name of Physician
Date(s) of Departure - Date(s) of Return		City and State Where Treated	
☐ D. BUSINESS	Employer's Name	Date(s) of Departure - Date(s) of Return	
☐ E. COLLEGE, SCHOOL OR UNIVERSITY		Name of School	
Was resident tuition paid?	YES ☐ NO ☐	Degree Sought or Other Purpose	Dates of Attendance
☐ F. VACATION OR OTHER REASONS		Date(s) of Departure - Date(s) of Return	
Please explain reasons (attach additional pages as necessary)			

12. RESIDENCY VERIFICATION. The statement below must be read and signed by two adults who know you, and who can attest to your eligibility for a permanent fund dividend. These persons must be willing to answer questions about your residency if requested to do so by the Department of Revenue. Your permanent fund dividend may be delayed or denied if the persons you select do not respond to such an inquiry. Persons you may wish to ask to verify your residency include your spouse, other relatives, close friends or neighbors. While not necessary, it is preferable that these persons be Alaska residents who are also applying for their permanent fund dividends.

I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident during the period October 3, 1982 through March 31, 1983, and is still an Alaska resident.

I understand that I may be contacted by the Alaska Department of Revenue to verify my signature below.

A. Signature of Spouse, Relative or Friend		Date
Printed Name of Person Who Signed Above	Social Security Number	
Mailing Address		
City, State, Zip Code	Daytime Telephone No. ()	
B. Signature of Relative or Friend		Date
Printed Name of Person Who Signed Above	Social Security Number	
Mailing Address		
City, State, Zip Code	Daytime Telephone No. ()	

13. SIGNATURE. It is important that you carefully read the following statement before signing.

I certify that I am now and intend to remain an Alaska resident at the time I file this application and that I was an Alaska resident during the period October 3, 1982 through March 31, 1983.

I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense and that if convicted I will forfeit future permanent fund dividends and that I must repay all permanent fund dividends that have been paid to me.

I also understand that this penalty is in addition to any criminal penalties imposed.

SIGN HERE

Signature
Date

DUE DATE: JUNE 30, 1983

**SEND TO: Alaska Department of Revenue
Pouch SR
Juneau, Alaska 99811**

1984



Alaska Permanent Fund Dividend Program

ADULT APPLICATION

A

DUE DATE: JUNE 30, 1984

THIS SPACE FOR OFFICE USE ONLY

This application must be used by all eligible residents who are 18 years of age or older; or who are legally emancipated minors if less than 18 years of age. TO FILE ON BEHALF OF ANOTHER ADULT, YOU MUST ALSO COMPLETE AND ATTACH FORM 04-100 B. USE THE SEPARATE FORM 04-100 C TO FILE ON BEHALF OF A CHILD. Please type or print neatly.

PERMANENT FUND DIVIDEND RESIDENCY DEFINED

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, demonstrate at all times during your absence an intent to return to Alaska and remain permanently, and be absent for at least one of the allowable reasons as stated in the instructions.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

YES NO

☐ ☐ A. I was an Alaska resident during the period October 1, 1983 through March 31, 1984; and

☐ ☐ B. I am, and intend to remain, an Alaska resident at the time I file this application.

You are eligible to apply for an Alaska permanent fund dividend only if you answered yes to both statements.

2. I was born in Alaska.

Yes ☐ No ☐

3. My date of birth:

MONTH DAY YEAR

4. My Social Security Number My Home Phone My Work Phone

5. My First Name Middle Initial Last Name

Mailing Address

City, State and Zip Code

6. My home is physically located at: (number, street and city, or physical location)

7. ADULT'S STATUS. Please check the appropriate box in both categories A and B.

A. I have the following residency status:

☐ 1. Alaska resident and U.S. citizen

☐ 2. Alaska resident alien

(Enter Alien Registration No. A-_____)

☐ 3. Refugee or asylee residing in Alaska

(Enter Alien Registration No. A-_____)

B. I have adult status because I am:

☐ 1. 18 years of age or older

☐ 2. Under 18 years of age but legally emancipated by: (check one)

☐ a. Marriage (attach copy of marriage certificate)

☐ b. Other (attach copy of court order)

Receipt of Applications: When processing has begun on your 1984 application, you will be notified by mail. If you need to know before then that your application has been received, you may send it by U.S. certified mail with a return receipt requested.

SEND TO: Alaska Department of Revenue
Pouch SR
Juneau, Alaska 99811-0400

Dividend checks will be issued beginning October 1984.

8. My present Alaska residency began:

9. My spouse's First Name Middle Initial Last Name

10. Name of my primary employer during the period October 1, 1983 through March 31, 1984.

Employer's Mailing Address

Employer's Tel. No.:

Date employment began:

My occupation: (Note, If you or your spouse were a member of the U.S. armed forces, then you must attach a copy of that person's Leave and Earnings Statement for September 1983. If U.S. Coast Guard, attach a certified copy of form DD 2058, State of Legal Residence Certificate.)

11. ABSENCES. ANSWER EACH QUESTION A-E.

During the period October 1, 1983 through March 31, 1984, were you out of Alaska:

YES NO

☐ ☐ A. For more than 60 consecutive days?

☐ ☐ B. For more than 90 total days?

☐ ☐ C. For the entire period?

☐ ☐ D. Are you currently living outside Alaska?

☐ ☐ E. If yes, have you been absent from Alaska for more than five years?

For Office Use Only

If you answered "yes" to any question above, you must explain the reason(s) for your absence(s) in section 13 on the back of this page. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.

12. HOUSEHOLD INFORMATION. If possible, please submit all the applications from your household (same mailing address) at the same time.

Enter the total number of applications that will be submitted from your household at this time: _____

13. EXPLANATION OF ABSENCES. Did you answer "yes" to any question in section 11?		Remember that you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g. to vote in a state or local election, to qualify for resident tuition at a college or university, etc.), then you have terminated your eligibility for an Alaska permanent fund dividend.
YES If the answer is "yes", please explain the reason(s) for your absence(s) in the appropriate categories below. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.		
NO If the answer is "no", go on to section 14.		
☐ A. OUT OF STATE AS SPOUSE OR DEPENDENT OF PERSON WITH ALLOWABLE ABSENCE If you check this box you must also check the category of the other person's absence and provide the requested information for that person.		
Name, Social Security Number, and Address of Person You Were With		
☐ B. MILITARY	Branch of Service	Serial Number
Date(s) of Departure - Date(s) of Return		Home of Residency - Attach L.E.S. for September 1983
Date of Enlistment or Last Reenlistment		
☐ C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN		Name of Physician
Date(s) of Departure - Date(s) of Return		City and State Where Treated
☐ D. BUSINESS	Employer's Name	Date(s) of Departure - Date(s) of Return
☐ E. COLLEGE, SCHOOL OR UNIVERSITY		Name of School
Was resident YES NO tuition paid? ☐ ☐		Degree Sought or Other Purpose
Dates of Attendance		
☐ F. VACATION OR OTHER REASONS		Date(s) of Departure - Date(s) of Return
Please explain reasons (attach additional pages as necessary)		
14. RESIDENCY VERIFICATION. The statement below must be read and signed by two adults who know you, and who can attest to your eligibility for a permanent fund dividend. These persons must be willing to answer questions about your residency if requested to do so by the Department of Revenue. Your permanent fund dividend may be delayed or denied if the persons you select do not respond to such an inquiry. Persons you may wish to ask to verify your residency include your spouse, other relatives, close friends or neighbors. While not necessary, it is preferable that these persons be Alaska residents who are also applying for their permanent fund dividends.		
I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident during the period October 1, 1983 through March 31, 1984, and is still an Alaska resident.		
I understand that I may be contacted by the Alaska Department of Revenue to verify my signature below.		
A. Signature of Spouse, Relative or Friend		Date
Printed Name of Person Who Signed Above		Social Security Number
Mailing Address		
City, State, Zip Code		Daytime Telephone No. ()
B. Signature of Relative or Friend		Date
Printed Name of Person Who Signed Above		Social Security Number
Mailing Address		
City, State, Zip Code		Daytime Telephone No. ()
15. SIGNATURE. It is important that you carefully read the following statement before signing. If you make any alteration to this statement, you will be denied a permanent fund dividend.		
I certify that I am now and intend to remain an Alaska resident at the time I file this application and that I was an Alaska resident during the period October 1, 1983 through March 31, 1984.		
I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense and that if convicted I will forfeit future permanent fund dividends and that I must repay all permanent fund dividends that have been paid to me.		
I also understand that this penalty is in addition to any criminal penalties imposed.		
SIGN HERE		
Signature		
Date		
DUE DATE: JUNE 30, 1984		
SEND TO: Alaska Department of Revenue Pouch SR Juneau, Alaska 99811-0400		

1985

Alaska Permanent Fund Dividend Program

ADULT APPLICATION

A

DUE DATE: JUNE 30, 1985

THIS SPACE FOR OFFICE USE ONLY

This application must be used by all eligible residents who are 18 years of age or older, or who are legally emancipated minors if less than 18 years of age. **TO FILE ON BEHALF OF ANOTHER ADULT, YOU MUST ALSO COMPLETE AND ATTACH FORM 04-100 B. USE THE SEPARATE FORM 04-100 C TO FILE ON BEHALF OF A CHILD.** Please type or print neatly.

PERMANENT FUND DIVIDEND RESIDENCY DEFINED

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, demonstrate at all times during your absence an intent to return to Alaska and remain permanently, and be absent for at least one of the allowable reasons as stated in the instructions.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

YES NO

☐ ☐

A. I was an Alaska resident for the entire period October 1, 1984 through March 31, 1985; and

☐ ☐

B. I am, and intend to remain, an Alaska resident at the time I file this application.

You are eligible to apply for an Alaska permanent fund dividend only if you answered yes to both statements.

My date of birth:

MONTH

DAY

YEAR

3. My Social Security Number*

*You are not required to provide any social security number requested on this form. See line 3 instructions for the intended use of social security numbers.

4. My First Name Middle Initial Last Name

Mailing Address

City, State, Zip Code

5A. My home is physically located at: (number, street and city, or physical location)

5B. My Home Phone

()

5C. My Work Phone

()

6. RESIDENCY STATUS. I have the following residency status:

☐ A. Alaska resident and U.S. citizen.

☐ B. Alaska resident alien, or refugee or asylee residing in Alaska.

(Enter Alien Registration No. A-_____)

7. ADULT STATUS. I have adult status because I am:

☐ A. 18 years of age or older.

☐ B. Under 18 years of age but legally emancipated by: (check one)

☐ 1. Marriage (attach copy of marriage certificate).

☐ 2. Other (attach copy of court order).

NEED HELP?

Inside Alaska, outside Anchorage and Juneau, call Toll Free Zenith 4900 or Zenith 2333, or come into one of our Public Service Centers:

FAIRBANKS

675 Seventh Avenue
Phone 452-1512

ANCHORAGE

550 West 7th Avenue
Phone 276-2678

JUNEAU

1111 West 8th Street
Phone 465-2326

8. I have been a continuous Alaska resident since: (month, day if known, year)

9. My spouse's First Name Middle Initial Last Name

10. EMPLOYMENT DURING RESIDENCY PERIOD.

A. Name of my primary employer during the period October 1, 1984 through March 31, 1985.

NOTE: If employer is military, check this box if you are a civilian: ☐

B. Employer's Mailing Address

Employer's Tel. No.:

Date employment began:

C. My occupation: (Note: If you were a member of the U.S. armed forces, then you must attach a copy of your Leave and Earnings Statement for September 1984. If unavailable, attach a certified copy of form DD 2058, State of Legal Residence Certificate.)

11. ABSENCES. During the period October 1, 1984 through March 31, 1985, were you absent from Alaska for any reason for any length of time?:

☐ **NO.** If your answer is no, go on to section 13 on the back.

☐ **YES.** If your answer is yes, were you absent: (Answer each question A-E below.)

YES NO

☐ ☐

A. For the entire period?

☐ ☐

B. For more than 90 total days?

☐ ☐

C. For more than 60 consecutive days?

☐ ☐

D. Are you currently living outside Alaska?

☐ ☐

E. If yes, have you been absent from Alaska for more than five years?

For Office Use Only

If you answered "yes" to any question A-E above, you must explain the reason(s) for your absence(s) in section 12 on the back of this page. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.

IMPORTANT: YOU MUST COMPLETE AND SIGN THE REVERSE SIDE

12. EXPLANATION OF ABSENCES. If you answered "yes" to any question A-E in section 11, you must explain the reason(s) for your absence(s) in the appropriate categories below. Failure to disclose an absence as required may result in the loss of your eligibility for a permanent fund dividend.

Remember that you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g., to vote in a state or local election, or to qualify for resident tuition at a college or university), then you have terminated your eligibility for an Alaska permanent fund dividend.

☐ **A. OUT OF STATE AS SPOUSE OR DEPENDENT OF PERSON WITH ALLOWABLE ABSENCE**

If you check this box you must also check the category of the other person's absence and provide the requested information for that person.

Name, Social Security Number, and Address of Person You Were With

☐ **B. ARMED FORCES**

Branch of Service

Serial Number

State of Legal Residence - Attach L.E.S. for September 1984

Date(s) of Departure - Date(s) of Return

Date of Enlistment or Last Reenlistment

☐ **C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN**

Name of Physician

Date(s) of Departure - Date(s) of Return

City and State Where Treated

☐ **D. BUSINESS**

Employer's Name

Date(s) of Departure - Date(s) of Return

☐ **E. COLLEGE, SCHOOL OR UNIVERSITY**

Name of School

Was resident
tuition paid?

YES NO

☐ ☐

Degree Sought or Other Purpose

Dates of Attendance

☐ **F. VACATION OR OTHER REASONS**

Date(s) of Departure - Date(s) of Return

Please explain reasons (attach additional pages as necessary)

RESIDENCY VERIFICATION BY TWO ADULTS WHO KNOW YOU

The statement below must be read and signed by two adults who know you, and who can attest to your eligibility for a permanent fund dividend. These persons must be willing to answer questions about your residency if requested to do so by the Department of Revenue. Your permanent fund dividend may be delayed or denied if the persons you select do not respond to such an inquiry. Persons you may wish to ask to verify your residency include your spouse, other relatives, close friends or neighbors. While not necessary, it is preferable that these persons be Alaska residents who are also applying for their permanent fund dividends.

I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period October 1, 1984 through March 31, 1985 and is still an Alaska resident.

I understand that I may be contacted by the Alaska Department of Revenue to verify my signature below.

13. Signature of Spouse, Relative or Friend		14. Signature of Relative or Friend	
X		X	
Printed Name of Person Who Signed Above	Social Security Number	Printed Name of Person Who Signed Above	Social Security Number
Mailing Address	*Please see SSN advisory note at section 3.	Mailing Address	*Please see SSN advisory note at section 3.
City, State, Zip Code	Daytime Telephone No. ()	City, State, Zip Code	Daytime Telephone No. ()

YOUR SIGNATURE IS REQUIRED

15. SIGNATURE. It is important that you carefully read the following statement before signing. If you make any alteration to this statement, you will be denied a permanent fund dividend.

I certify that I am now and intend to remain an Alaska resident at the time I file this application and that I was an Alaska resident for the entire period October 1, 1984 through March 31, 1985.

I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense, and that if convicted, I will forfeit future permanent fund dividends, and that I must repay all permanent fund dividends that have been paid to me.

I also understand that this penalty is in addition to any criminal penalties imposed.

Signature

Date

X

DUE DATE: JUNE 30, 1985

SEND TO: Alaska Department of Revenue
Pouch SR
Juneau, Alaska 99811-0400

Receipt of Applications: When processing has begun on your 1985 application, you will be notified by mail. If you need to know before then that your application has been received, you may send it by U.S. certified mail with a return receipt requested or deliver it in person to a Revenue Public Service Center. If possible, please submit all the applications from your household (same mailing address) at the same time.

Dividend checks will be issued beginning October 1985.

1986

Alaska Permanent Fund Dividend Program

ADULT APPLICATION

A

DUE DATE: JUNE 30, 1986

THIS SPACE FOR OFFICE USE ONLY

This application must be used by all eligible residents who are 18 years of age or older, or who are legally emancipated minors if less than 18 years of age. TO FILE ON BEHALF OF ANOTHER ADULT, YOU MUST ALSO COMPLETE AND ATTACH FORM 04-100 B. USE THE SEPARATE FORM 04-100 C TO FILE ON BEHALF OF A CHILD. Please type or print neatly.

PERMANENT FUND DIVIDEND RESIDENCY DEFINED

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, demonstrate at all times during your absence an intent to return to Alaska and remain permanently, and be absent for at least one of the allowable reasons as stated in the instructions.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

YES NO

☐ ☐

A. I was an Alaska resident for the entire period October 1, 1985 through March 31, 1986.

☐ ☐

B. I am, and intend to remain, an Alaska resident at the time I file this application.

You may apply for an Alaska permanent fund dividend only if you answered yes to both statements.

2. My date of birth:

MONTH DAY BIRTH YEAR

*You are not required to provide any social security number requested on this form. For their intended use, see the instructions for line 3 on page 3.

3. My Social Security Number*

4. My First Name

Initial

Last Name

Mailing Address

City, State, Zip Code

5. My home is physically located at: (number, street and city, or physical location)

6A. My Home Telephone No.

()

6B. My Work Telephone No.

()

7. CITIZENSHIP STATUS. I have the following status:

☐

A. U.S. citizen

☐

B. Resident alien, refugee, or asylee

(Enter Alien Registration No. A-)

8. ADULT STATUS. I have adult status because I am:

☐

A. 18 years of age or older

☐

B. Under 18 years of age but legally emancipated by: (check one)

☐

1. Marriage (attach copy of marriage certificate)

☐

2. Other (attach copy of court order)

9. I have been a continuous Alaska resident since: (month, day if known, year)

10. My spouse's name: (first name, initial, last name)

11. EMPLOYMENT DURING RESIDENCY PERIOD.

A. Name and mailing address of my primary employer during the period October 1, 1985 through March 31, 1986:

B. Date employment began:

C. Employer's Telephone No.:

D. My occupation: (Note: If you were a member of the U.S. armed forces, you must attach a copy of your Leave and Earnings Statement for September 1985. If unavailable, attach a certified copy of form DD 2058, State of Legal Residence Certificate.)

E. Work Status: In the box to the right, enter the letter A-L which describes your work status. See page 4 of the line-by-line instructions for work status codes.

12. ABSENCES. During the period October 1, 1985 through March 31, 1986, were you absent from Alaska for more than 60 consecutive days or more than 90 total days?

☐ NO. If you answered no, go on to section 13.

☐ YES. If you answered yes, you must explain the reason(s) for your absence(s) in section 14 on the back of this page, AND you must answer each question, A-C, below.

YES NO

☐ ☐

A. Were you absent for the entire period?

☐ ☐

B. Are you currently living outside Alaska?

☐ ☐

C. If you are now living outside Alaska, has your absence been for more than five years?

For Office Use Only

If you fail to disclose an absence as required above, you may be denied a permanent fund dividend.

13. ALASKA WINTER OLYMPICS CONTRIBUTION. If you check the "yes" box, five dollars will be subtracted from your dividend check and deposited in the Alaska Winter Olympics account. Your contribution will be used to develop facilities for Winter Olympic training and competition, and to attract the Winter Olympics to Alaska. If you check the "no" box, you will receive the full dividend amount. See the line-by-line instructions on page 4 for further information.

YES NO

☐ ☐

I want to contribute \$5.00 of my dividend check to the Alaska Winter Olympics account.

NOTE: At press time, this contribution program was subject to legislative approval. If not approved for the 1986 dividend year, any "yes" answer will be disregarded.

14. EXPLANATION OF ABSENCES. If you answered "yes" to any question in section 12, you must explain the reason(s) for your absence(s) in the appropriate categories below. If you fail to disclose an absence as required, you may be denied a permanent fund dividend.

Remember, you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g. to vote in a state or local election, or to qualify for resident tuition at a college or university), then you have terminated your eligibility for an Alaska permanent fund dividend.

☐ **A. OUT OF STATE AS THE SPOUSE OR DEPENDENT OF A PERSON WITH AN ALLOWABLE ABSENCE**
If you check this box you must also check the category of the other person's absence and provide the requested information for that person.

Name, Social Security Number, and Address of Person You Were With

☐ **B. ARMED FORCES**

Branch of Service

Serial Number

State of Legal Residence - (Attach L.E.S. for September 1985)

Date(s) of Departure - Date(s) of Return

Date of Enlistment or Last Reenlistment

☐ **C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN**

Name of Physician

Date(s) of Departure - Date(s) of Return

City and State Where Treated

☐ **D. BUSINESS**

Employer's Name

Date(s) of Departure - Date(s) of Return

☐ **E. COLLEGE, SCHOOL OR UNIVERSITY**

Name of School

Was resident
tuition paid? YES NO
☐ ☐

Degree Sought or Other Purpose

Dates of Attendance

☐ **F. VACATION OR OTHER REASONS**

Date(s) of Departure - Date(s) of Return

Please explain reasons (attach additional pages as necessary)

RESIDENCY VERIFICATION BY TWO ADULTS WHO KNOW YOU

The statement below must be read and signed by two adults who know you, and who can attest to your eligibility for a permanent fund dividend. These persons must be willing to answer questions about your residency if requested to do so by the Department of Revenue. Your permanent fund dividend may be delayed or denied if the persons you select do not respond to such an inquiry. Persons you may wish to ask to verify your residency include your spouse, other relatives, close friends or neighbors. While not necessary, it is preferable that these persons be Alaska residents who are also applying for their permanent fund dividends.

I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period October 1, 1985 through March 31, 1986 and is still an Alaska resident.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

15. Signature of Spouse, Relative or Friend		16. Signature of Relative or Friend	
			
Date		Date	
Printed Name of Person Who Signed Above		Printed Name of Person Who Signed Above	
Social Security Number*		Social Security Number*	
Mailing Address		Mailing Address	
City, State, Zip Code		City, State, Zip Code	
Daytime Telephone No. ()		Daytime Telephone No. ()	

*Please see SSN advisory note at section 3.

YOUR SIGNATURE IS REQUIRED

17. SIGNATURE. It is important that you carefully read the following statement before signing. If you make any alteration to this statement, you will be denied a permanent fund dividend.

I certify under penalty of perjury that I am now and intend to remain an Alaska resident at the time I file this application and that I was an Alaska resident for the entire period October 1, 1985 through March 31, 1986.

I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense, and that if convicted, I will forfeit future permanent fund dividends, and that I must repay all permanent fund dividends that have been paid to me.

I also understand that this penalty is in addition to any criminal penalties imposed.

Signature	Date
	

DUE DATE: JUNE 30, 1986

**SEND TO: Alaska Department of Revenue
P.O. Box SR
Juneau, Alaska 99811-0400**

Receipt of Applications: When processing has begun on your 1986 application, you will be notified by mail. If you need to know before then that your application has been received, you are advised to send it by U.S. certified mail with a return receipt requested or deliver it in person to a Revenue Public Service Center. If possible, please submit all the applications from your household (same mailing address) at the same time.

Dividend checks will be issued beginning October 1986.

987

ADULT APPLICATION

A

DUE DATE: JUNE 30, 1987

THIS SPACE FOR OFFICE USE ONLY

This application is for use by any eligible resident who is 18 years of age or older, or who is a legally emancipated minor if less than 18 years old. TO FILE ON BEHALF OF ANOTHER ADULT, YOU MUST ALSO COMPLETE AND ATTACH FORM 04-100 B. USE THE SEPARATE FORM 04-100 C TO FILE ON BEHALF OF A CHILD. Please type or print neatly.

PERMANENT FUND DIVIDEND RESIDENCY DEFINED

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must be present in the state and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, and must show at all times during your absence an intent to return to Alaska and remain permanently, and be absent for an allowable reason.

1. ELIGIBILITY REQUIREMENTS. Please check the appropriate box beside each of the following statements.

YES NO

☐ ☐ A. I was an Alaska resident from October 1, 1986 through March 31, 1987.

☐ ☐ B. I am, and intend to remain, an Alaska resident at the time I file this application.

You may apply for an Alaska permanent fund dividend only if you answered yes to both statements.

2. Your date of birth

MONTH DAY BIRTH YEAR

3. Your Social Security Number*

CAUTION: The social security number is optional, but if not provided, 20% of your dividend may be withheld for federal taxes. See instructions for line 3 on page 3.

4. Your First Name

Initial

Last Name

Mailing Address

City, State, Zip Code

5. Where is your home located? (number, street and city, or physical location)

6A. Your Home Telephone No.

6B. Your Work Telephone No.

()

()

7. YOUR CITIZENSHIP STATUS. (answer yes or no)

YES NO

☐ ☐ Are you a U.S. citizen? If you answered no, and you are a resident alien, refugee, or asylee, enter your

Alien Registration No. A-

8. YOUR STATUS AS AN ADULT. (answer yes or no)

YES NO

☐ ☐ Are you 18 years of age or older? If you answered no, you must either use the Child Application form, or attach one of the following: (check one)

☐ 1. Copy of your marriage certificate

☐ 2. Copy of court order giving you adult status

9. You have been a continuous Alaska resident since (month, day if known, year)

10. Your spouse's name (first name, initial, last name)

11. YOUR EMPLOYMENT DURING THE RESIDENCY PERIOD.

A. Name and mailing address of your main employer during the period October 1, 1986 through March 31, 1987 (NOTE: If you were a member of the U.S. armed forces, you must attach a copy of your Leave and Earnings Statement for September 1986 which shows your state of legal residence. CAUTION: Your application will not be processed unless you provide the L.E.S.)

NOTE: If employer is military, check this box if you are a civilian: ☐

B. Date employment began

C. Employer's Telephone No.

12. ABSENCES. During the period October 1, 1986 through March 31, 1987, were you absent from Alaska for more than 60 days in a row or more than 90 total days?

☐ NO. If you answered no, go on to section 13.

☐ YES. If you answered yes, you must explain the reason(s) for your absence(s) in section 14 on the back of this page, AND you must answer each question, A-C, below.

YES NO

☐ ☐ A. Were you absent for the whole period?

☐ ☐ B. Are you currently living outside Alaska?

☐ ☐ C. If you are now living outside Alaska, have you been absent for more than five years?

If you fail to disclose an absence as required above, you may be denied a permanent fund dividend.

13. ALASKA WINTER OLYMPICS CONTRIBUTION. If you check the "yes" box, five dollars will be subtracted from your dividend check and deposited in the Alaska Winter Olympics account. Your contribution will be used to develop facilities for Winter Olympic training and competition, and to attract the Winter Olympics to Alaska. If you check the "no" box, you will receive the full dividend amount. All responses are final.

YES NO

☐ ☐ I want to contribute \$5.00 of my dividend check to the Alaska Winter Olympics account.

For Office Use Only

STOP. Did you fill out both columns on the front?

14. EXPLANATION OF ABSENCES. If you answered "yes" to any question in section 12, you must explain the reason(s) for your absence(s) below. If you fail to disclose an absence as required, you may be denied a permanent fund dividend.
Remember, you can be a resident of only one state at a time. If you claim residency in another state for any significant purpose (e.g. to vote in a state or local election, or to qualify for resident tuition at a college or university), then you have given up your right to an Alaska permanent fund dividend.

☐ **A. OUT OF STATE AS THE SPOUSE OR DEPENDENT OF A PERSON WITH AN ALLOWABLE ABSENCE**

If you check this box you must also check the category below of the other person's absence and provide the requested information for that person.

Name, Social Security Number, and Address of Person You Were With

☐ **B. ARMED FORCES**

Branch of Service

Serial Number

State of Legal Residence - (Attach L.E.S. for September 1986)

Date(s) of Departure - Date(s) of Return

Date of Enlistment or Last Reenlistment

☐ **C. MEDICAL TREATMENT UNDER CARE OF LICENSED PHYSICIAN**

Name of Physician

Date(s) of Departure - Date(s) of Return

City and State Where Treated

☐ **D. BUSINESS**

Employer's Name

Date(s) of Departure - Date(s) of Return

☐ **E. COLLEGE, SCHOOL OR UNIVERSITY**

Name of School

Was resident tuition paid?

YES NO

Degree Sought or Other Purpose

Dates of Attendance

☐ **F. VACATION OR OTHER REASONS**

Date(s) of Departure - Date(s) of Return

Please explain reasons (attach additional pages as necessary)

RESIDENCY VERIFICATION IS REQUIRED BY TWO ADULTS WHO KNOW YOU

The statement below must be read and signed by two adults who know you, and who can confirm that you are eligible for a permanent fund dividend. These persons must be willing to answer questions about your residency if requested to do so by the Department of Revenue. Your permanent fund dividend may be delayed or denied if the persons you select do not respond to such an inquiry. Persons you may wish to ask to verify your residency include your spouse, other relatives, close friends or neighbors. It is preferable that these persons be Alaska residents who are also applying for their permanent fund dividends.

I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period October 1, 1986 through March 31, 1987 and is still an Alaska resident.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

15. Signature of Spouse, Relative or Friend

Date

X

Printed Name of Person Who Signed Above

Social Security Number*

Mailing Address

*Please see SSN advisory note below.

City, State, Zip Code

Daytime Telephone No.

()

16. Signature of Relative or Friend

Date

X

Printed Name of Person Who Signed Above

Social Security Number*

Mailing Address

*Please see SSN advisory note below.

City, State, Zip Code

Daytime Telephone No.

()

*You are not required to provide your social security number. If provided, it will be used only for identification purposes in connection with this program.

YOUR SIGNATURE IS REQUIRED

17. SIGNATURE. It is important that you carefully read the following statement before signing. If you make any alteration to this statement, you will be denied a permanent fund dividend.

I certify under penalty of perjury that I am now and intend to remain an Alaska resident at the time I file this application and that I was an Alaska resident for the entire period October 1, 1986 through March 31, 1987.

I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense, and that if convicted, I will forfeit future permanent fund dividends, and that I must repay all permanent fund dividends that have been paid to me.

I also understand that this penalty is in addition to any criminal penalties imposed.

Your Signature

Date

X

DUE DATE: JUNE 30, 1987

SEND TO: Alaska Department of Revenue
P.O. Box SR
Juneau, Alaska 99811-0400

Receipt of Applications: When processing has begun on your 1987 application, you will be notified by mail. If you need to know before then that your application has been received, you should send it by U.S. certified mail with a return receipt requested or deliver it in person to a Revenue Public Service Center. If possible, please file all the applications from your household (same mailing address) at the same time.

Dividend checks will be issued beginning October 1987.

1988

Alaska Permanent Fund Dividend Program

ADULT APPLICATION

A

DUE DATE: JUNE 30, 1988

THIS SPACE FOR OFFICE USE ONLY

BEFORE YOU FILE, PLEASE MAKE SURE YOU ARE ELIGIBLE.

- ☐ Yes, I was an Alaska resident from October 1, 1987 through March 31, 1988; AND
- ☐ Yes, I am now, and intend to remain, a resident of Alaska.

1A. Your Date of Birth
MONTH DAY BIRTH YEAR

1B. Sex
(circle)
F M

***CAUTION. The social security number is optional, but if not provided, 20% of your dividend is likely to be withheld for federal taxes. See instructions on the other side.**

2. Your Social Security Number*

3. Your First Name Initial Last Name

Mailing Address

City

State

Zip Code

4. Where is your home located? (number, street and city, or physical location)

5. Do you want to donate \$10.00 of your dividend to the Alaska Winter Olympics Account? 5 ☐ YES ☐ NO
(See other side for details.)

6. Do you physically live in Alaska? 6 ☐ YES ☐ NO
If no, enter the date you last lived in Alaska and complete section 19.

MONTH DAY YEAR

7. Did you file for a dividend last year? 7 ☐ YES ☐ NO
If no, enter the date you became an Alaska resident.

MONTH DAY YEAR

8. Are you a United States Citizen? 8 ☐ YES ☐ NO
If no, enter your Alien Registration No. A-
(See instructions on other side.)

9. Are you a member of the U.S. Military or U.S. Coast Guard? 9 ☐ YES ☐ NO
If yes, attach a copy of either a recent Leave and Earnings Statement, or form DD2058 State of Legal Residence Certificate.

10. Were you gone from Alaska for more than 60 days in a row or more than 90 total days during the residency period? (10/1/87-3/31/88) ... 10 ☐ YES ☐ NO

11. Were you absent for the whole residency period? ... 11 ☐ YES ☐ NO

12. Have you been absent for more than five years? ... 12 ☐ YES ☐ NO

If you answered "yes" to questions 10, 11, or 12, you must explain the reason(s) for your absence(s) in section 19 on the other side.

RESIDENCY PERIOD

October 1, 1987 through March 31, 1988

To be a resident for the purpose of qualifying for an Alaska permanent fund dividend, you must live in Alaska and intend to remain permanently. If you are outside Alaska, you must have been a resident before leaving, and must show at all times during your absence an intent to return to Alaska and remain permanently, and be absent for an allowable reason. A person who has never lived in Alaska cannot claim residency.

RESIDENCY VERIFICATION IS REQUIRED BY TWO ADULTS WHO KNOW YOU

13. The statement below must be read and signed by two adults who know you, and who can confirm that you are eligible for a permanent fund dividend. Enter their names and addresses in section 20 on the other side.

I certify under penalty of perjury that I have read and understand the definition of an Alaska resident as stated on this application, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period October 1, 1987 through March 31, 1988 and is still an Alaska resident.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

A. Signature of Spouse, Relative or Friend Date
X (Put address on back)

B. Signature of Relative or Friend Date
X (Put address on back)

14. Signature. It is important that you carefully read the following statement before signing. If you make any change to this statement, you will be denied a permanent fund dividend.

I certify that I am now and intend to remain an Alaska resident and that I was an Alaska resident for the entire period October 1, 1987 through March 31, 1988.

I understand that a false claim of residency to obtain a permanent fund dividend for myself or for another is a criminal offense, and that if convicted, I will forfeit future permanent fund dividends, and that I must repay all permanent fund dividends that have been paid to me. I also understand that this penalty is in addition to any criminal penalties imposed.

I further certify under penalty of perjury that to the best of my knowledge and belief, all the information on this application, including any attachment, is true and complete.

YOUR SIGNATURE IS REQUIRED

Your Signature Date
X

NOW COMPLETE THE OTHER SIDE

Use this form to apply for your own dividend if you are 18 years of age or older. If you are under the age of 18, use this form only if you are married, or emancipated by court order. **TO FILE ON BEHALF OF ANOTHER ADULT, YOU MUST ALSO COMPLETE AND ATTACH FORM 04-100B. USE THE SEPARATE FORM 04-100C TO FILE ON BEHALF OF A CHILD.**

Line 2. SOCIAL SECURITY NUMBER (SSN). You are not required to give us your social security number. However, if you do not give us your correct number and the dividend is \$600 or more, we will be required to send 20% of your dividend to the IRS. This is known as backup withholding. Once the money has been withheld, you will need to file a federal income tax return to get it back.

SSN Must Be Correct. Do not use someone else's social security number or let anyone else use your number. If you give us a wrong SSN, you may be fined \$50.00 by the IRS. If you don't know your number, or don't have one, contact the Social Security Office. (See page 3 of the instructions for details.)

Other Uses of SSN's. The Department of Revenue uses social security numbers for identification and other purposes. In addition to the IRS, social security numbers may be given to the Division of Elections, the Department of Education, the Department of Labor, the Department of Natural Resources, the Department of Public Safety, and the Court System, or to any other government agency for official use.

Line 5. ALASKA WINTER OLYMPICS CONTRIBUTION. If you check the "yes" box, ten dollars will be subtracted from your dividend check and deposited in the Alaska Winter Olympics account. Your contribution will be used to develop facilities for Winter Olympic training and competition, and to attract the Winter Olympics to Alaska. If you check the "no" box, you will receive the full dividend amount. All responses are final.

Line 8. ALIEN REGISTRATION NUMBER. The alien registration number is printed on a form commonly known as a "green card." These cards are issued to resident aliens. The alien registration number for refugees and asylees is stamped on their Departure Record, form I-94.

If you are not a U.S. citizen, and you do not have resident alien status, you must attach to your application some proof that you intend to stay in Alaska permanently.

DUE DATE: JUNE 30, 1988

**SEND TO: Alaska Department of Revenue
P.O. Box S-0460
Juneau, Alaska 99811-0460**

Please file all the applications from your household (same mailing address) in the same envelope.

Receipt of Applications

When your 1988 application has been put on file, you will be notified by mail. If you need to know before then that your application has been received, you should send it by U.S. certified mail with a return receipt requested or deliver it in person to a Revenue Dividend Information Office.

Dividend checks will be issued beginning in October 1988.

15. Are you an adult 18 years of age or older? ☐ YES ☐ NO If no, use the Child Application form, OR attach one of the following: (check one) ☐ 1. Copy of your marriage certificate (if under 18) ☐ 2. Copy of court order giving you adult status (if under 18) 16A. Name and mailing address of your main employer during the residency period <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 50%; padding: 2px;">B. Date employment began</td> <td style="width: 50%; padding: 2px;">C. Employer's Telephone No.</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table> 17. Your spouse's name (first name, initial, last name) <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 50%; padding: 2px;">18A. Your Home Telephone No. ()</td> <td style="width: 50%; padding: 2px;">18B. Your Work Telephone No. ()</td> </tr> </table>	B. Date employment began	C. Employer's Telephone No.			18A. Your Home Telephone No. ()	18B. Your Work Telephone No. ()	19. Explanation of Lengthy Absences. Complete this section if you were out of Alaska for more than 60 days in a row or more than 90 total days, or if you live outside Alaska. Enter the date(s) you left Alaska and the date(s) you returned or plan to return. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 50%; padding: 2px; text-align: center;">DATE(S) OF DEPARTURE</td> <td style="width: 50%; padding: 2px; text-align: center;">DATE(S) OF RETURN</td> </tr> <tr> <td style="height: 30px;"></td> <td style="height: 30px;"></td> </tr> </table> Why were you out of Alaska? (Check all that apply) ☐ A. Out of Alaska as the spouse or dependent of a person with an allowable absence <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 70%; padding: 2px;">NAME OF PERSON YOU WERE WITH</td> <td style="width: 30%; padding: 2px;">PERSON'S SSN</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table> ☐ B. Transferred by U.S. Military or U.S. Coast Guard ☐ C. Medical treatment under doctor's care ☐ D. Business ☐ E. Education (college, school or university) YES NO Was resident tuition paid? ☐ ☐ ☐ F. Vacation ☐ G. Other (explain)	DATE(S) OF DEPARTURE	DATE(S) OF RETURN			NAME OF PERSON YOU WERE WITH	PERSON'S SSN		
B. Date employment began	C. Employer's Telephone No.														
18A. Your Home Telephone No. ()	18B. Your Work Telephone No. ()														
DATE(S) OF DEPARTURE	DATE(S) OF RETURN														
NAME OF PERSON YOU WERE WITH	PERSON'S SSN														

20. Enter the names and addresses of the two adults who verified your residency by signing section 13 on the other side.

Printed Name of Person Who Signed 13A	Social Security Number*	Printed Name of Person Who Signed 13B	Social Security Number*
Mailing Address	*Please see SSN advisory note below.	Mailing Address	*Please see SSN advisory note below.
City, State, Zip Code		City, State, Zip Code	
	Daytime Telephone No. ()		Daytime Telephone No. ()

*You are not required to provide your social security number. If provided, it will be used only for identification purposes in connection with this program.

1989



Alaska Permanent Fund Dividend Adult Application

A

Office Use Only

- ☐ Yes, I was an Alaska resident from October 1, 1988 through March 31, 1989; AND
- ☐ Yes, I am now, and intend to remain a resident of Alaska.

1. Your Social Security Number		CAUTION: SSN is optional, but if not provided, 20% of your dividend is likely to be withheld for federal taxes.	
2A. Your Date of Birth Month Day Birth Year	2B. State of Birth	2C. Sex ☐ M ☐ F	
3. Your Name as It Appears on Your Birth Certificate (See instructions page 4) First M.I. Last			
4. Your First Name M.I. Last Name			
Your Mailing Address			
City		State	Zip Code
5. Where Do You Physically Live (Street Address or Physical Location)?			
6A. Your Home Phone Number ()		6B. Your Work Phone Number ()	

7. Do you physically live in Alaska? Yes ☐ No ☐
If no, complete Questions 20 - 22.
8. Did you file for a dividend last year? Yes ☐ No ☐
If no, complete the Supplemental Schedule, which is included in this booklet.
9. Are you a United States citizen? Yes ☐ No ☐
If no, complete Question 19.
10. Are you a member of the United States military? Yes ☐ No ☐
If yes, attach a September, 1988 Leave and Earnings Statement.
11. Were you gone from Alaska for more than 30 days in a row, or more than 90 days total during the period of April 1, 1988 through March 31, 1989? Yes ☐ No ☐
If yes, complete Questions 20 - 22.
12. Were you absent for the whole residency period of October 1, 1988 through March 31, 1989? Yes ☐ No ☐
If yes, complete Questions 20 - 22.
13. Do you want to donate \$10.00 of your dividend to the Alaska Winter Olympics Account? Yes ☐ No ☐

Complete Questions 16 - 18 on the other side.

Due Date: June 30, 1989

You are responsible for filing by the deadline.

Residency Certification by the Applicant

14. Signature. It is important that you read the following statement before signing. If you make any change to this statement you will be denied a permanent fund dividend.

- I certify that I am now and intend to remain an Alaska resident, that I was an Alaska resident for the entire period of October 1, 1988 through March 31, 1989, and have been physically present in the State of Alaska at some time during the period beginning July 1, 1987 and ending on the date of this application.
- I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, and if convicted I will forfeit future dividends, and I must repay all dividends paid to me. I also understand that if I wilfully misrepresent, exercise gross negligence, or recklessly disregard a material fact regarding my eligibility for a permanent fund dividend I will forfeit the dividend, be subject to a civil fine of up to \$5,000, and lose my eligibility for the next five dividends. I understand that these penalties are in addition to any criminal penalties imposed.

I authorize the Alaska Department of Revenue to obtain information from any source to verify my claim of residency.

I know that I have a right to receive a copy of this authorization upon request and agree that a copy of this authorization is as valid as the original.

14. Signature X	Date /
---------------------------	-----------

Residency Verification by Two Adults Who Know You

15. The statement below must be read and signed by two adults who know you, and who can confirm that you are eligible for a permanent fund dividend.

- I certify under penalty of unsworn falsification that I have read and understand the definition of an Alaska resident as stated in this booklet, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period of October 1, 1988 through March 31, 1989 and is still an Alaska resident and was physically present in the State of Alaska at some time during the period beginning with July 1, 1987, and ending on the date of this application.
- I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, and if convicted I will forfeit future dividends, and I must repay all dividends that have been paid to me. I also understand that if I wilfully misrepresent, exercise gross negligence, or recklessly disregard a material fact pertaining to the eligibility of the person named on this application for a permanent fund dividend, I will be subject to a fine of up to \$5,000, and may lose my own eligibility for a dividend for the next five years.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

15A. Signature X	Date
Printed Name	Social Security Number
Mailing Address	SSN is Optional
City, State, Zip Code	Daytime Phone Number ()
15B. Signature X	Date
Printed Name	Social Security Number
Mailing Address	SSN is Optional
City, State, Zip Code	Daytime Phone Number ()

Follow the directions which precede each set of questions. Failure to follow directions will cause a delay in the processing of your application.

ALL applicants must answer questions 16 through 18. If the questions do not apply to you, put N/A in that box.

16A. Name and mailing address of your main employer during the residency period of October 1, 1988 through March 31, 1989.

17. Are you 18 years old or older?

Yes ☐ No ☐

- ☐ a. If no, and married, attach your marriage certificate. It will be returned to you.
- ☐ b. If no, and legally emancipated, attach a copy of the court order giving you adult status.

Note: If you are not 18 years old or older and did not mark a or b, you need to use the Child Application form (04-100 C).

18A. Your Spouse's Name (first, middle initial, last)

Is your spouse filing for a 1989 dividend? Yes ☐ No ☐

16B. Date Employment Began

16C. Employer's Phone Number

()

18B. Your Spouse's Employer

18C. Spouse's Work Number

()

Answer the following questions ONLY if you answered NO to question 9.

19A. Are you an Alien with resident status? Yes ☐ No ☐

If yes, give your Alien Registration No. A- _____

19B. Are you in the United States as a refugee? Yes ☐ No ☐

If yes, give the date you entered the United States- ____/____/____

Answer the following questions ONLY if:

- you answered NO to question 7; or
- you answered YES to questions 11 or 12.

20. Reasons for Lengthy Absences. Check the primary reason you were absent from Alaska.

- ☐ A. Out of state as the spouse or dependent of a person with an allowable absence.

Name of Person You Were With		M.I.		Last Name	
First Name					
Person's Birth Date		Person's Social Security Number			
Month	Day	Year			

- ☐ B. Enrolled as a full-time student.
(List the name, address and type of school.)

- ☐ C. Transferred by the United States military.
- ☐ D. Vacation.
- ☐ E. Business.
- ☐ F. Seeking Employment.
- ☐ G. Medical treatment under a physician's care.
- ☐ H. Other (List the reason) _____

21. List the dates you were gone from Alaska since April 1, 1988.

Left	Returned
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____

NOTE: THE FOLLOWING QUESTION IS A NEW ELIGIBILITY QUESTION.

22. Were you physically present in Alaska on the date you signed this application? Yes ☐ No ☐
- If no, attach supporting documents that prove you were physically present in Alaska at some time since July 1, 1987.

DUE DATE: JUNE 30, 1989

**SEND TO: ALASKA DEPARTMENT OF REVENUE
P.O. BOX S-0460
JUNEAU, ALASKA 99811-0460**

Please file all the applications from your household (same mailing address) in the same envelope. (See the confidentiality section on page 3 of the instruction booklet.)

1990

Office Use Only

Alaska Permanent Fund Dividend

Adult Application

A

Please Print Clearly!

1. Your Social Security Number		CAUTION: SSN is optional, but if not provided, 20% of the dividend will be withheld as required by federal law.	
2A. Your Date of Birth	2B. State of Birth	2C. Sex	
Month Day Birth Year		☐ M ☐ F	
3. Your Name as It Appears on Your Birth Certificate (See page 4, #3.)			
First Name	M.I.	Last Name	
4. Your First Name M.I. Last Name			
Your Mailing Address			
City State Zip Code			
5. Where Do You Physically Live (Street Address or Physical Location)?			
6A. Your Home Phone Number		6B. Your Work Phone Number	
()		()	

7. Did you file for last year's dividend (1989)? Yes ☐ No ☐8. Did you live in Alaska prior to April 1, 1988? Yes ☐ No ☐

STOP! - If you answered no to both questions 7 and 8, you are not eligible for the 1990 dividend and should not file. (See the new 2 year residency requirement on page 4 of the application booklet.)

9. Do you physically live in Alaska? Yes ☐ No ☐

If no, answer Questions 19-22 AND complete the Supplemental Schedule, which is included in this booklet, and attach it to this application.

10. Are you a United States citizen? Yes ☐ No ☐

If no, complete Question 18.

11. Were you gone from Alaska for more than 30 days in a row or 90 days total during the period of April 1, 1989 through March 31, 1990? Yes ☐ No ☐

If yes, complete Questions 19-22.

12. Were you absent for the entire period of January 1, 1990 through March 31, 1990? Yes ☐ No ☐

If yes, complete Questions 19-22.

Complete Questions 15-17 on the other side.

FILING DEADLINE: June 30, 1990

Your application must be received in the Department or postmarked by the deadline.

Residency Certification by the Applicant

13. Signature. It is important that you read the following statement before signing. If you make any change to this statement you will be denied a permanent fund dividend.

I certify that I am now and intend to remain an Alaska resident, have been physically present in the State of Alaska at some time during the period beginning July 1, 1988 and ending on the date that I sign this application, and that one or both of the following statements is true:

☐ I was an Alaska resident for the entire period of April 1, 1988 through March 31, 1990;

- OR -

☐ I filed for a 1989 dividend and that I was an Alaska resident for the entire period of October 1, 1989 through March 31, 1990.

I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, that if convicted I will forfeit future dividends, and I must repay all dividends paid to me. I also understand that if I wilfully misrepresent, exercise gross negligence, or recklessly disregard a material fact regarding my eligibility for a permanent fund dividend I will forfeit the dividend, be subject to a civil fine of up to \$5,000, and lose my eligibility for the next five dividends. I understand that these penalties are in addition to any criminal penalties imposed.

I authorize the Alaska Department of Revenue to obtain information from any source to verify my claim of residency, and I agree that a copy of this authorization is as valid as the original.

13. Signature	Date
X	

Residency Verification by Two Adults Who Know You

14. The statement below must be read and signed by two adults who know you, and who can confirm that you are eligible for a permanent fund dividend.

I certify under penalty of unsworn falsification that I have read and understand the residency requirements of the Permanent Fund Dividend program as stated in this booklet, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period(s) checked by the applicant in Question 13 above and is still an Alaska resident, and was physically present in the state for sometime between July 1, 1988 and the date of this application.

I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, and if convicted I will forfeit future dividends, and that I must repay all dividends that have been paid to me. I also understand that if I wilfully misrepresent, exercise gross negligence, or recklessly disregard a material fact pertaining to the eligibility of the person named on this application for a permanent fund dividend I will be subject to a fine of up to \$5,000, and will lose my own eligibility for a dividend for the next five years.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

14A. Signature (Spouse, Relative or Friend)		Date
X		
Printed Name		Social Security Number
Mailing Address		SSN is Optional
City, State, Zip Code		Daytime Phone Number
		()
14B. Signature (Spouse, Relative or Friend)		Date
X		
Printed Name		Social Security Number
Mailing Address		SSN is Optional
City, State, Zip Code		Daytime Phone Number
		()

Follow the directions which precede each set of questions. Failure to follow directions will cause a delay in the processing of your application.

ALL applicants must answer questions 15 through 17. If the questions do not apply to you, put N/A in answer to that question.

15A. Name and mailing address of your main employer during the period of October 1, 1989 through March 31, 1990.

16. Are you 18 years old or older?

Yes ☐ No ☐

☐ a. If no, and married, attach your marriage certificate. It will be returned to you.

☐ b. If no, and legally emancipated, attach a copy of the court order giving you adult status.

Note: If you are not 18 years old or older, and did not mark a or b, you need to use the Child Application form (04-100 C).

17A. If married, enter your spouse's name (first, middle initial, last)

17B. Is your spouse filing for a 1990 dividend?

Yes ☐ No ☐

15B. Date Employment Began

15C. Employer's Phone Number
()

17C. Your Spouse's Employer

17D. Spouse's Work Number
()

Answer the following questions ONLY if you answered NO to question 10.

18A. Are you an alien with resident status? Yes ☐ No ☐

If yes, give your Alien Registration No. A- _____

18B. Are you in the United States as a refugee? Yes ☐ No ☐

If yes, give the date you entered the United States ____/____/____

Answer the following questions ONLY if you answered NO to question 9 or answered YES to question 11 or 12.

19. Reasons for Absences. Check primary reason you were absent from Alaska.

☐ A. Out of state as the spouse or dependent of an Alaska resident with an allowable absence.

Name Resident You Were With									
First			M.I.				Last		
Resident's Birth Date									
Month	Day	Year	Resident's Social Security Number						

☐ B. Enrolled as a full-time student.
(List the name, address and type of school.)

☐ C. Transferred by the United States military.

☐ D. Vacation.

☐ E. Business.

☐ F. Seeking employment.

☐ G. Medical treatment under a doctor's care.

☐ H. Other (explain).

20. List the dates you were gone from Alaska since April 1, 1989.

Left	Returned
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____
____/____/____	____/____/____

21. Were you physically present in Alaska on the date you signed this application? Yes ☐ No ☐

22. If you answered Question 21 no, were you physically present in Alaska at some time during the period beginning on July 1, 1988 and ending on the date you signed this application? Yes ☐ No ☐

• If you were physically present in Alaska at some time since July 1, 1988, attach supporting documents that prove your presence. (Examples of supporting documents can be found on page 6, line 21-22 of the application booklet.)

• If you were not physically present in Alaska at some time since July 1, 1988, then you are not eligible for the 1990 dividend, and should not file.

FILING DEADLINE: June 30, 1990

Your application must be received in the Department or postmarked by the deadline.

1991

Office Use Only

Please Print Clearly!

1. Your Social Security Number			CAUTION. SSN is optional, but if not provided, 20% of the dividend will be withheld as required by federal law.		
2A. Your Date of Birth Month Day Birth Year			2B. State of Birth		2C. Sex ☐ M ☐ F
3. Your First Name M.I. Last Name					
Your Mailing Address					
City		State		Zip Code	
4. Where Do You Physically Live (Street Address or Physical Location)?					
5A. Your Home Phone Number ()			5B. Your Work Phone Number ()		
6. Your Name as It Appears on Your Birth Certificate (See page 4, #6.)					
First Name		M.I.		Last Name	

7. Did you file for last year's dividend (1990)? If no, complete the **Supplemental Schedule**, which is included in this booklet. Yes ☐ No ☐
8. Are you a member of the U.S. military? If yes, attach a September, 1990 Leave and Earnings Statement. Yes ☐ No ☐
9. Do you physically live in Alaska? If no, answer **Questions 20-23 AND** complete the **Supplemental Schedule**, which is included in this booklet, and attach it to this application. Yes ☐ No ☐
10. Are you a United States citizen? If no, complete **Question 19**. Yes ☐ No ☐
11. Were you gone from Alaska for more than 30 days in a row during the period of April 1, 1990 through March 31, 1991? If yes, complete **Questions 20 - 23**. Yes ☐ No ☐
12. Were you gone from Alaska for more than 180 days cumulative during the period of April 1, 1990 through March 31, 1991? If yes, complete **Questions 20 - 23**. Yes ☐ No ☐
13. Do you want to place 50% of your Permanent Fund Dividend in an Educational Trust Fund for yourself or for another person? (See page 8 of the instructions.) Yes ☐ No ☐

Complete Questions 16 - 18 on the other side.

FILING DEADLINE: June 30, 1991
Your application must be received in the Department or
postmarked by the deadline.

Alaska Permanent Fund Dividend

Adult Application

If you are filing on behalf of another adult, complete a B Application.

A

Residency Certification by the Applicant

14. Signature. It is important that you read the following statement before signing. If you make any change to this statement you will be denied a permanent fund dividend.

I certify that I am now and intend to remain an Alaska resident, was an Alaska resident for the entire period of April 1, 1990 through March 31, 1991, and have been physically present in the State of Alaska at some time during the period beginning July 1, 1989 and ending on the date that I sign this application.

I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, that if convicted I will forfeit future dividends, and I must repay all dividends paid to me. I also understand that if I willfully misrepresent, exercise gross negligence, or recklessly disregard a material fact regarding my eligibility for a permanent fund dividend I will forfeit the dividend, be subject to a civil fine of up to \$5,000, and lose my eligibility for the next five dividends. I understand that these penalties are in addition to any criminal penalties imposed.

I authorize the Alaska Department of Revenue to obtain information from any source to verify my claim of residency, and I agree that a copy of this authorization is as valid as the original.

14. Signature X	Date
--------------------	----------

Residency Verification by Two Adults Who Know You

15. The statement below must be read and signed by two adults who know you, and who can confirm that you are eligible for a permanent fund dividend.

I certify under penalty of unsworn falsification that I have read and understand the residency requirements of the Permanent Fund Dividend program as stated in this booklet, and that to the best of my knowledge and belief the person named on this application was an Alaska resident for the entire period of April 1, 1990 through March 31, 1991, is still an Alaska resident, and was physically present in the state at some time during the period beginning July 1, 1989 and ending on the date of this application.

I understand that a false claim of eligibility to obtain a permanent fund dividend for myself or for another is a criminal offense, and if convicted I will forfeit future dividends, and that I must repay all dividends that have been paid to me. I also understand that if I willfully misrepresent, exercise gross negligence, or recklessly disregard a material fact pertaining to the eligibility of the person named on this application for a permanent fund dividend I will be subject to a fine of up to \$5,000, and will lose my own eligibility for a dividend for the next five years.

I understand that I may be contacted by the Alaska Department of Revenue regarding the eligibility of the person named on this application.

15A. Signature (Spouse, Relative or Friend) X		Date
Printed Name		Social Security Number
Mailing Address		SSN is Optional
City, State, Zip Code		Daytime Phone Number ()
15B. Signature (Spouse, Relative or Friend) X		Date
Printed Name		Social Security Number
Mailing Address		SSN is Optional
City, State, Zip Code		Daytime Phone Number ()

Follow the directions which precede each set of questions. Failure to follow directions will cause a delay in the processing of your application.

ALL applicants must answer questions 16 through 18. If the questions do not apply to you, put N/A in answer to that question.

16. Name and mailing address of your employer(s) during the period of April 1, 1990 through March 31, 1991. If retired - write "retired." If unemployed - write "unemployed."

EMPLOYER NAME	ADDRESS & PHONE NUMBER	DATES EMPLOYED
1.		
2.		
3.		
4.		

17. Are you 18 years old or older?

Yes ☐ No ☐

☐ a. If no, and married, attach your marriage certificate. It will be returned to you.

☐ b. If no, and legally emancipated, attach a copy of the court order giving you adult status.

Note: If you are not 18 years old or older and did not mark a or b, you must use the Child Application form (04-100 C).

18A. If married, enter your spouse's name

First M.I. Last

18B. Spouse's Birth Date

Month Day Year

18C. Is your spouse filing for a

1991 dividend?

Yes ☐ No ☐

18D. Spouse's Employer

18E. Spouse's Work Number

()

Answer the following questions ONLY if you answered NO to question 10.

19A. What is your Alien Registration No.? A -

19C. When did you obtain this status? / /

19B. What is your current alien status?

All non-US citizens must submit a copy of the front and back of their Alien Registration Card with their application.

Answer the following questions ONLY if you answered NO to question 9 or answered YES to questions 11 or 12.

20. Reasons for Absences. Check reason(s) you were absent from Alaska during the period of April 1, 1990 through March 31, 1991.

☐ A. Out of state as the spouse or dependent of an Alaska resident with an allowable absence.

Name of Resident You Were With		
First	M.I.	Last
Resident's Birth Date		
Month	Day	Year
Resident's Social Security Number		

☐ B. Enrolled as a full-time student.

☐ C. Active duty personnel transferred by the US Military. This does not include members of the US Public Health Service (Note: If transferred as a spouse or dependent of a military member, mark A above and complete the box.)

☐ D. Vacation.

☐ E. Business.

☐ F. Seeking employment.

☐ G. Medical treatment under a doctor's care.

☐ H. Other (explain).

21. List the dates you were gone from Alaska since April 1, 1990. If you left prior to 4/1/90 - enter the date you actually departed.

Left	Returned
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /

22. Were you physically present in Alaska on the date you signed this application?

Yes ☐ No ☐

23. If you answered Question 22 no, were you physically present in Alaska at some time during the period beginning on July 1, 1989 and ending on the date you signed this application?

Yes ☐ No ☐

● If you were physically present in Alaska at some time since June 30, 1989, attach supporting documents that prove your presence. (Examples of supporting documents can be found on page 5, line 22-23 of the application booklet.)

● If you were not physically present in Alaska at some time since June 30, 1989, then you are not eligible for the 1991 dividend, and should not file.

FILING DEADLINE: June 30, 1991
Mail your application to: Department of Revenue
P O Box S-0460, Juneau, AK 99811-0460

521 #A Idaho Street
Anchorage, AK 99504
November 25, 1991

REGARDING: Permanent Fund Dividend Check

For the past 6 years, I have lived in Alaska. My 5-year-old son was born here in Anchorage. I have an Alaskan Driver's License. I have been registered to vote since 1988. I have been running my own small business of a Licensed Child Day Care Home since 1989. I have been involved in my community by helping clarify and change regulations in both Day Care Assistance and the licensing of Day Care Homes.

My husband and I have made every effort to continue to live here in Alaska because we enjoy the beauty and opportunities in this state. I am proud to be an Alaskan resident.

For the past four years, I have applied and received the Permanent Fund Dividend for myself and my son because we are Alaskan residents. This year I applied for a Permanent Fund Dividend and was told not only am I not eligible for the dividend but I and my son have never been eligible and now I may have to return all dividends plus interest that my son and I have received after my case is reviewed.

The reason for my ineligibility as told to me by the Permanent Fund Dividend Office. It doesn't matter that I have lived here for 6 years or that my son was born here. I am married to a military nonresident and, therefore, I must then claim my husband's state of residency even though I am an Alaskan resident. My son also must claim his father's state of residency even though he is an Alaskan resident and the only state my son has ever lived in is Alaska.

I thought marriage was a partnership of individuals equal on both sides. According to the Permanent Fund Dividend Office that is not the case. If you are married to military nonresident only one person has rights - the nonresident. The spouse who is the resident is the dependent one and has no rights. The children also are considered dependents and have no rights.

When you apply for the Permanent Fund Dividend, you apply as an individual. Each person must file a separate form with the Permanent Fund Dividend Office. The Permanent Fund Dividend Office looks at each family not as individuals but as a family group and if one spouse is a military nonresident then the whole family is not considered "true Alaskans with rights."

Why does the Permanent Fund Dividend Office penalizes you for being married to a military nonresident? The military nonresident is no different than a nonresident with a job. The military requires at times for you to move that doesn't mean that you want to move. It doesn't mean your intentions have changed.

The military voluntarily protects the United States without a great deal of compensation and for that protective service the military family is penalized by not being eligible for the Permanent Fund Dividend because we are unable to show

intent to stay. The Permanent Fund Dividend Office will not accept any documentation from the military family to show intent to stay that they would normally accept from a resident married to a nonresident.

This is showing discrimination of the military by denying eligibility of the Dividend to a resident married to or children of a military or military nonresident.

Exactly what is intent? There have been no clear-cut guidelines only broad generalizations. This causes confusion for the public and depends upon interpretation by the Permanent Fund Dividend Office. Interpretation is not a clear-cut guideline.

Life is too unpredictable, it is impossible to make guarantees. Even Alaska residents whose intent has been to live here permanently have had to move out of the state for many different reasons. What happens to their Permanent Fund Dividends that they received while living in Alaska as residents? Now that they are no longer Alaskan residents do they get penalized and have to return all Dividends plus interest because they did not permanently remain in Alaska?

A resident is a resident. Being married or being a child doesn't change that fact. The Permanent Fund Dividend Office is trying to distinguish between a resident with rights and a resident without rights. This is discrimination.

Sincerely,

Lynne A. Wilshire

Lynne A. Wilshire

CALL
EARLY DECEMBER

November 23, 1991

Dear Representative Martin,

I am writing because of your apparent involvement with those whose residency has been brought into question with respect to the Permanent Fund Dividend. If my understanding is correct you are conducting either a formal or informal hearing this date to receive testimony particularly from Alaska residents who have married men in the military.

My wife and I have been having a similar difficulty. You and I have met on several occasions but I know you meet many people. A little of our background will help you to understand our perspective.

We moved to Alaska in 1961. For nearly twenty-eight years I was Pastor of Scenic Park Bible Church. In approaching my 60th birthday, I planned to resign from my long pastorate and make room for a younger man. In seeking the Lord's leading about future ministry and with the counsel of Godly men, God has led us to an Interim Pastoral ministry. I know you are a devout Roman Catholic (and serious about your faith), therefore you may not be familiar with Interim Pastoral ministry. It means that I am available to churches after the loss of their pastor and during the period they are searching for a new permanent pastor.

As I have no interest in retirement, and am in good health, we launched into this ministry in Sept 1989. Our first ministry took us to Lloydminster, Saskatchewan - we were there for 13 months. Upon leaving there we gladly came back to Glennallen, Alaska and I have been Interim Pastor at the Glennallen Community Chapel since October 1990. (They have recently called their permanent Pastor.) We shall be leaving here in a few weeks - we do not know where at this point. We plan to move to Anchorage to wait upon the Lord's direction.

Sorry, for this lengthy letter but I believe it is necessary. We applied for the 1990 Dividend while living in Canada. We received a batch card, indicating our checks would arrive in early December 1990. Before leaving Canada we had received a request for additional information which we supplied. We had returned to Alaska (Glennallen) in October 1990. Instead of receiving our checks we received notification that our checks had been held up because of a review of our residency, etc.

We applied for the 1991 check. Again additional information was requested, which we supplied. Again we received notification that our application was under review and our checks would not be sent.

As part of my appeal to them I referred to their own correspondence which stated that their investigations were "designed to weed out seasonal workers, college students and others who are collecting dividends but who actually have no intention of remaining in Alaska." I believe any Alaskan would agree that such intent is in the best interests of the State because these people were not Alaskan residents with the intent to stay.

In the "rules" they do make several exceptions as to those whose work takes them out of the State, under which rules they maintain their resi-

deny. In my appeal to them, I asked for consideration for my type of work in view of the fact of our long residency (Alaska is our home for thirty years) and it is our desire to live in Alaska. But we also have a Higher Calling - to be available to help churches who call upon us. I have not heard from them about considering our type of work.

We have become resigned to the fact that we are no longer residents as far as the Permanent Fund is concerned. And we know how those wives of military men feel. Their computer software is leading them into predicting what the future holds for people. It is a position of arrogance to mess with people's future lives.

In closing (sound like a preacher), my wife and I are grieved with what Alaska has become. We have so many people who are unhappy and suing seems to be the order of the day. For many, decisions by PFD people are a threat to their security, and as residents they believe the money is coming to them.

A rule which was designed to "weed-out" non-residents is now being used against residents with a track record of Alaska as home. The whole issue is further polarizing the people of this State, and frankly it grieves me.

I hope the legislature takes hold of this instead of delegating such powers to the PFD Board. No matter what the PFD Board says, my wife and I will be residents of Alaska until we take steps to establish residency elsewhere. We have a vested interest - five children and ten grand children who live here.

Thank you for reading my letter. I have always appreciated your sincere efforts on behalf of Alaska, particularly where moral issues are in question. Thank you for standing for truth and what's right.

Sincerely,


JACK & MARY LOU BACHER

Jan. 13, 1991
Anchorage, AK

Representative Terry Martin
P. O. Box V
Juneau, AK 99811

Dear Representative Martin,

Because of a physical condition known as Seasonal Affective Disorder (S.A.D.), my wife has to be in the Lower 48 too many days each year to retain her residency.

Consequently, we do not file an Application for a Permanent Fund Dividend for her. And since we do not apply for a Dividend for her, the Permanent Fund Dividend Office has withheld MY 1991 Permanent Fund Dividend.

Their unfair assumption is that if she is not a resident, how could I be one.

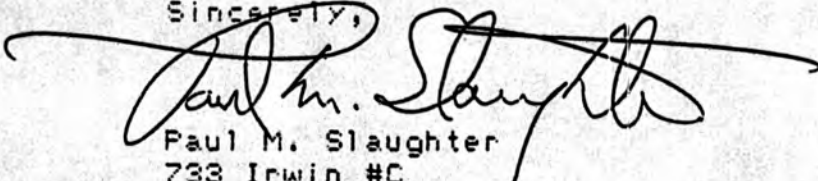
Sir, I am presently a resident of Alaska, and have been since 1982. I am an Alaskan registered voter here, I've had an Alaskan driver's license continuously, own a home in Anchorage where I live, and have been a Teacher in Mountain View Elementary School for 8 years.

What else can I do to get my Dividend check released? I am entitled to a Dividend as much as any Alaskan who received one this year. Would you be able to help me in this extremely unfair situation?

Obviously, I am strongly in favor of your Bill # HB374.

I thank you for whatever assistance you can give on this matter.

Sincerely,



Paul M. Slaughter
733 Irwin #C
Anchorage, AK 99508

8541 East 4th Avenue #A
Anchorage, AK 99504
November 25, 1991

Alaska Department of Revenue
Permanent Fund Dividend Division
P.O. Box S-0463
Juneau, AK 99811-0463

Gentlemen:

In 1986 I moved to Alaska with my husband who is stationed at Elmendorf AFB. Shortly after arrival, I became entranced with the beauty and opportunities the state holds for young people. That and the wonderful educational possibilities for our children convinced me that I wanted to be an Alaskan. I am here and I intend to stay here for the foreseeable future. I have no other residence, nor have I claimed any.

Consistent with my intent, I obtained an Alaska drivers license shortly after moving to Anchorage. I registered to vote and have voted in several elections. I have attended Alaska Business College to finish school and obtained an Alaska State Student Loan. (One of the requirements for which is being an Alaska resident.) I am a Notary Public for the state of Alaska, one of the requirements of which is that you are a resident of the state. I have held a fishing license in previous years. This year I did not obtain one because of the fact that my baby, who was born here, was too young to take fishing. My husband put in for an ipcot and we were extended from a three year to a six year tour.

I have served jury duty within the last two months. I am an Alaska resident and have every reason to believe the state recognizes my status as such. I have not made any attempt to relocate out of the state. If, and when, my husband gets orders to leave the state then, and only then, will I determine whether to leave the state or not. Until that time I have, and have had, every intention to remain in the state permanently. He may be sent back to Saudi. I did not go with him when he went before, nor would I go with him if he goes again. I am an independent person. I have a mind of my own, and I make my own decisions. Just because he chose to retain his residency in Illinois is no indication that I do not intend to stay in Alaska. No one knows for sure where they are going to be thirty years from now. Who knows, maybe our Governor plans on retiring in Arizona. I hear the last one went to Monteray, California.

What bothers me more than myself being denied the Permanent Fund Dividend is the fact that my son, who was born in Alaska, is being denied his. My son is 9 months old - how dare some bureaucrat determine that he does not intend to stay here. He has never told me that.

For the last four years I have had every reason to think that I was an Alaska resident and now just because my husband desires to retain his Illinois residence, I am not a resident? That is asinine. When I married I did not loose my identity. The old rule that a husband and wife are one, and he is it does not have any place in a society geared to the future. I retain my separateness.

I respect the state's trying to cut down paying people who do not have any intention in remaining or eventually returning to the state, but do not punish the people who do.

Sincerely,

Julie A. Pointer
Julie A. Pointer

To:
Terry Martin
Anchorage, Alaska

From:
William D. Webster
P.O. Box 5072
Ketchikan, Alaska 99901

Subject: Permanent Fund Dividends
for Merchant Mariners

Dear Mr. Martin,

I am writing this letter in regard to legislation Rep. Robin Taylor has pre-filed in advance of the upcoming legislative session. The legislation in question would make it possible for Merchant Mariners who live in Alaska to receive their fair part of the Permanent Fund.

As it now stands, if a Merchant Mariner travels to a major seagoing union hall and ships out deep-sea, they cannot receive their Permanent Fund, (and are not Alaskans).

We Merchant Mariners bring you your food, gas, cars, building materials etc. and haul away the very oil that the Permanent Fund is based on, if there were no Merchant mariners there would be no Permanent Fund!

As the law now stands, if you go outside the 12-mile limit of Alaska waters to work you are no longer an Alaskan and will not receive your Permanent Fund Dividend, the group of Alaskans effected include fishermen, merchant mariners and airline pilots, just to name a few.

I myself have been denied a permanent fund because I was on a ship full of bombs in the indian ocean, this ship was contracted to the U.S. Government (as is over 30 other ships at Diego Garcia), and eventually was in operation Desert Storm (all the bombs were dropped on Iraq).

I am not a lawyer, but I have been researching Federal laws and I believe the Alaska Dept. of Revenue is in violation of Federal Civil Rights laws.

CFR 18/245 FEDERALLY PROTECTED ACTIVITIES:

(2B) WHOEVER, WHETHER OR NOT ACTING UNDER COLOR OF LAW, BY FORCE OR THREAT OF FORCE WILLFULLY INJURES, INTIMIDATES OR INTERFERES WITH, OR ATTEMPTS TO INJURE, INTIMIDATE OR INTERFERE WITH-

(1) ANY PERSON BECAUSE HE IS OR HAS BEEN, OR IN ORDER TO INTIMIDATE SUCH PERSON OR ANY PERSON OR CLASS OF PERSONS FROM-
(B) PARTICIPATING IN OR ENJOYING ANY BENEFIT, SERVICE, PRIVILEGE, PROGRAM, FACILITY, OR ACTIVITY PROVIDED OR ADMINISTERED BY THE UNITED STATES;

(E) PARTICIPATING IN OR ENJOYING THE BENEFITS OF ANY PROGRAM OR ACTIVITY RECEIVING FEDERAL FINANCIAL ASSISTANCE.---

---SHALL BE FINED NOT MORE THAN \$1000, OR IMPRISONED NOT MORE THAN ONE YEAR OR BOTH

CFR 18/241 CONSPIRACY AGAINST RIGHTS OF CITIZENS
IF TWO OR MORE PERSONS CONSPIRE TO INJURE, OPPRESS, THREATEN
OR INTIMIDATE ANY CITIZEN IN THE FREE EXERCISE OR ENJOYMENT
OF ANY RIGHT OR PRIVILEGE SECURED TO HIM BY THE CONSTITUTION OR
LAWS OF THE UNITED STATES, OR BECAUSE OF HIS HAVING SO
EXERCISED THE SAME.---
THEY SHALL BE FINED NOT MORE THAN \$10,000 OR IMPRISONED NOT MORE
THAN TEN YEARS OR BOTH.

The United States Merchant Marine is administered by the U.S
Coast Guard, the Alaska Dept of Revenue states that if you
try to enjoy this Federally administered program you will not be
an Alaskan resident and will not receive your Permanent Fund. Most
United States shipping receives federal assistance of one
kind or another, (the Alaska Marine Hwy System who I work for
receives federal highway money).

I am at this time filing a complaint with the United States
Attorney Generals office against the following people in the Alaska
Dept of Revenue for violating CFR 18/245 and CFR 18/241:

Mr. Mike McGee, Chief of Permanent Fund Operations
Mr. David W. Haas - Assistant Ombudsman
Mr. Thomas C. Williams - Director Permanent Fund Dividend Division
Mr. Darrel Rexwinkel - Acting Commissioner, Alaska Dept of revenue

The people who run the Alaska Dept of Revenue are very much
against this bill Mr. Taylor has introduced, because it would be
just that fewer people that their department could investigate,
thus assuring their office a fat budget for next year, (I have
provided the Anchorage Times News paper with dollar figures in
the past for an article on the permanent fund).

I have been in direct contact with the office of Lane Kirkland,
President of the AFL, CIO and Capt. Tim Brown, International
President of the Masters, Mates & Pilots, and they are 100% behind
this bill.

In closing, I wish to thank you for taking the time to read this
letter and hope that you will look favorably on this bill that
would stop the Alaska Dept. of Revenue from treating Merchant
Mariners like second class citizens.

Sincerely,

