

11828 SENNATE JUDICIALARY

**SCHEDULE C
GOVERNMENT CONTRACTS AND LEASES
CERTIFICATION**

Contracts and Offers to Contract

If NONE reportable, check box

List all contracts and offers to contract with the state or instrumentality of the state during calendar year 2005 held, bid or offered. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 21 of the LFD manual for more help.

Name(s) of Contractor

Contracting Agency/Department

Indicate: Bid, held or offer made

Contract number and description

Natural Resource Leases

If NONE reportable, check box

List all natural resource leases, including mineral, timber, or oil leases bid held or offered during calendar year 2005. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 22 of the LFD manual for more help.

Leaseholder

Nature of Lease

Indicate: Bid, held or offer made

Identity of Lease and Description

CERTIFICATION

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

Dennis E. Cook
SIGNATURE

12/15/05
DATE

Dennis E. Cook
Printed Name of Filer

Fairbanks AK
Place

File this Statement with the

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

OR

ALASKA PUBLIC OFFICES COMMISSION
PO Box 110222
Juneau, AK 99811-0222
240 Main, Rm. 201
Telephone 907/465-4864
FAX 907/465-4832

DEC 21 2005


2005

FAIRBANKS NORTH STAR BOROUGH

809 PIONEER ROAD
PHONE (907) 459-1441

P O BOX 71320
FAIRBANKS ALASKA 99707-1320

TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0531430	SCHOOL	01	GENERAL GOV	5.0040	60.56
LOT 1 SCHOOL Previously assessed as LN LN 25 2513  COOK DENNIS E COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621			EDUCATION	7.2310	87.50
			WAMP-EMS	.2590	3.13
			SWCD	1.1670	14.12
			WAMP-SCODEV	.1660	2.01
			STEER FSA	1.7330	20.97
			SCHOOL BOND	.9640	11.67
			LIBRARY BOND	.0200	.24
			TOTAL CURRENT TAX		

PENALTY & INTEREST	DELINQUENT TAXES					
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	TOTAL
<small>PENALTY & INTEREST ARE CHARGED TO DELINQUENT PAYMENTS IN ACCORDANCE WITH BOROUGH ORDINANCE.</small> <small>PENALTY ON 1 YEAR DELINQUENCY 10%</small> <small>ANNUAL RATE OF INTEREST 8%</small>	PRIOR YEARS					
TAXES ARE DUE JULY 1 AND DELINQUENT AFTER THE DATES SHOWN BELOW.						TOTAL DUE
	FIRST HALF	09/01/2005	100.10			200.20
	SECOND HALF	11/01/2005	100.10			

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	CLASSIFICATION	FAIRBANKS
05	12,102	200	16.5440	- .4890	ASSESSED VALUE	12,102
04	12,102	206	17.0330	- .2310	BOROUGH RESIDENTIAL EXEMPTION	0
03	12,102	209	17.2640	N/A	CITY RESIDENTIAL EXEMPTION	0
					STATE EXEMPTION	0
					BLDG FIRE SYS EXEMPTION	0
					VOLUNTEER EMS/FIRE EXEMPTION	0

FOR PAYMENTS MADE AFTER THE DUE DATES, PLEASE CALL THE TREASURY AND BUDGET DIVISION AT 907-459-1441 FOR THE CORRECT AMOUNT DUE.

TAXPAYER:
MAKE ALL CHECKS PAYABLE TO
FAIRBANKS NORTH STAR BOROUGH.
YOUR CANCELLED CHECK WILL BE YOUR RECEIPT.

FAIRBANKS NORTH STAR BOROUGH
809 PIONEER ROAD
PHONE (907) 459-1441

FISCAL ACCT. NUMBER **0531430**

RETURN THIS STUB WITH SECOND HALF PAYMENT.

TOTAL TAXES	200.20
PRIOR YEARS DELINQUENCY	.00
FIRST INSTALLMENT MUST BE PAID BY	100.10 09/01/2005
SECOND INSTALLMENT MUST BE PAID BY	100.10 11/01/2005

ADDRESS CHANGE

DELINQUENT TAXES MUST BE PAID WITH CASHIERS CHECK, MONEY ORDER OR CASH.

COOK DENNIS E
COOK OLGA B

05314300000100,00000200208

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FAIRBANKS NORTH STAR BOROUGH

808 PIONEER ROAD
PHONE (907) 459-1441

P O BOX 71220
FAIRBANKS ALASKA 99707-1220

TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0531448	SKOL	02	CENTRAL GOV	5.0040	64.88
OF 2 SKOL previously assessed as 1B 1W 2S 2S13  COOK DENNIS B COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621			EDUCATION	7.2310	93.75
			NAWP-EMG	.2590	3.36
			EWCD	1.1670	15.13
			NAWP-SCODEV	.1660	2.15
			STRESE YSA	1.7330	22.47
			SCHOOL BOND	.9640	12.50
			LIBRARY BOND	.0200	.26
			TOTAL CURRENT TAX	16.5440	214.50

PENALTY & INTEREST <small>(PENALTY & INTEREST ARE CHARGED ON DELINQUENT PAYMENTS IN ACCORDANCE WITH BOROUGH ORDINANCE.)</small>	DELINQUENT TAXES					
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	TOTAL
<small>PENALTY ON TAXES DUE 10% ANNUAL RATE OF INTEREST 8%</small>	PRIOR YEARS					
TAXES ARE DUE JULY 1 AND DELINQUENT AFTER THE DATES SHOWN BELOW.						TOTAL DUE 214.50
	FIRST HALF	09/01/2005		107.25		
	SECOND HALF	11/01/2005		107.25		

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	ASSESSED VALUE	EXEMPTIONS
05	12,965	214	16.5440	- .4890	12,965	BOROUGH RESIDENTIAL EXEMPTION 0
04	12,965	221	17.0330	- .2310		CITY RESIDENTIAL EXEMPTION 0
03	12,965	224	17.2640	N/A		STATE EXEMPTION 0
						BLDG FIRE SYS EXEMPTION 0
						VOLUNTEER EMS/FIRE EXEMPTION 0

FOR PAYMENTS MADE AFTER THE DUE DATES, PLEASE CALL THE TREASURY AND BUDGET DIVISION AT 907-459-1441 FOR THE CORRECT AMOUNT DUE.

TAXPAYER: FAIRBANKS NORTH STAR BOROUGH
 MAKE ALL CHECKS PAYABLE TO FAIRBANKS NORTH STAR BOROUGH
 YOUR CANCELLED CHECK WILL BE YOUR RECEIPT

FAIRBANKS NORTH STAR BOROUGH
 808 PIONEER ROAD
 PHONE (907) 459-1441

PARCEL ACCT. NUMBER: 0531448
 P O BOX 71220
 FAIRBANKS ALASKA 99707-1220

RETURN THIS STUB WITH SECOND HALF PAYMENT.

TOTAL TAXES	214.50
PRIOR YEARS DELINQUENT	.00
FIRST INSTALLMENT MUST BE PAID BY	107.25 09/01/2005
SECOND INSTALLMENT MUST BE PAID BY	107.25 11/01/2005

ADDRESS CHANGE

DELINQUENT TAXES MUST BE PAID WITH CASH, CHECK, MONEY ORDER OR CASH.

COOK DENNIS B
COOK OLGA B

05314480000107250000214504

DEC 21 2005


2005

FAIRBANKS NORTH STAR BOROUGH

808 PIONEER ROAD
PHONE (907) 459-1441

P O BOX 71980
FAIRBANKS ALASKA 99707-1320

TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0531456	SKOL	03	GENERAL GOV	5.0040	83.19
LOT 3 SKOL Previously assessed as 12 1W 25 2513			EDUCATION	7.2310	120.21
 COOK DENNIS E COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621			SEWER-EM	.2590	4.31
			SWCD	1.1670	19.40
			SEWER-ECODEV	.1660	2.76
			STREET P&A	1.7330	28.81
			SCHOOL BOND	.9640	16.03
			LIBRARY BOND	.0200	.33
			TOTAL CURRENT TAX		

PENALTY & INTEREST <small>PENALTY & INTEREST ARE ADDED TO DELINQUENT PAYMENTS IN ACCORDANCE WITH BOROUGH ORDINANCE. PENALTY ON TAXES DUE 10% ANNUAL RATE OF INTEREST 8%</small>	DELINQUENT TAXES					
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	TOTAL
	PRIOR YEARS					
TOTAL DUE						275.04

FIRST HALF 09/01/2005 137.52
SECOND HALF 11/01/2005 137.52

LOAN NBR: 0011071222
MT MCKINLEY MUTUAL SAVINGS

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	ASSESSED VALUE	AMOUNT
05	16,624	275	16.5440	- .4890	16,624	
04	16,624	283	17.0330	- .2310		
03	16,624	287	17.2640	N/A		
					ASSESSED VALUE	16,624
					BOROUGH RESIDENTIAL EXEMPTION	0
					CITY RESIDENTIAL EXEMPTION	0
					STATE EXEMPTION	0
					BLDG FIRE SYS EXEMPTION	0
					VOLUNTEER EMS/FIRE EXEMPTION	0

2005 0531456 COOK DENNIS E
COOK OLGA B

OFFICIAL TAX NOTICE
OUR RECORDS INDICATE YOUR TAXES WILL BE PAID BY THE MORTGAGE HOLDER REFERENCED ABOVE. IF THE ABOVE INFORMATION IS INCORRECT CONSIDER THIS A TAX BILL AND CONTACT THE BOROUGH TREASURY AND BUDGET DIVISION AT (907) 459-1441.

IF YOU HAVE AN ADDRESS CHANGE PLEASE NOTIFY THE FAIRBANKS NORTH STAR BOROUGH ASSESSING DEPARTMENT AT (907) 459-1000.

DEC 2:1 2005


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FAIRBANKS NORTH STAR BOROUGH

808 PIONEER ROAD
PHONE (907) 459-1441

P O BOX 71388
FAIRBANKS ALASKA 99707-1320

TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0531464	SKOL	04	GENERAL GOV	5.0040	850.32
LOT & SKOL Previously assessed as LE IN 25 2513  COOK DENNIS B COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621			EDUCATION	7.2310	1,228.79
			KAMP-EMS	.2590	44.01
			SNCD	1.1670	198.31
			KAMP-ECODEV	.1660	28.21
			STRESE PSA	1.7330	294.49
			SCHOOL BOND	.9640	163.81
			LIBRARY BND	.0200	3.40

PENALTY & INTEREST PENALTY & INTEREST ARE CHARGED TO DELINQUENT PAYMENTS IN ACCORDANCE WITH BOROUGH ORDINANCE. PENALTY ON TAXES DUE 10% ANNUAL RATE OF INTEREST 8%	DELINQUENT TAXES					
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	TOTAL
	PRIOR YEARS					
					TOTAL DUE	2,811.30

FIRST HALF 09/01/2005 1,405.65
 SECOND HALF 11/01/2005 1,405.65

LOAN NBR: 0011071222
 MT MCKINLEY MUTUAL SAVINGS

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	ASSESSED VALUE	
					169,929	
05	169,929	2,811	16.5440	- .4890	BOROUGH RESIDENTIAL EXEMPTION	0
04	158,741	2,704	17.0330	- .2310	CITY RESIDENTIAL EXEMPTION	0
03	155,024	2,676	17.2640	N/A	STATE EXEMPTION	0
					BLDG FIRE SYS EXEMPTION	0
					VOLUNTEER EMS/FIRE EXEMPTION	0

2005 0531464 COOK DENNIS B
 COOK OLGA B

OFFICIAL TAX NOTICE

 OUR RECORDS INDICATE YOUR TAXES WILL BE PAID BY THE MORTGAGE HOLDER REFERENCED ABOVE. IF THE ABOVE INFORMATION IS INCORRECT CONSIDER THIS A TAX BILL AND CONTACT THE BOROUGH TREASURY AND BUDGET DIVISION AT (907) 459-1441.

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FAIRBANKS NORTH STAR BOROUGH

808 PIONEER ROAD
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P O BOX 71220
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TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0147672	SALCHAKET TOWNSHIP 03	GENERAL GOV	5.0040	710.72
LOT 3 BLOCK 2 SALCHAKET TOWNSHIP COOK DENNIS E COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621		EDUCATION	7.2310	1,027.02
		MANP-EMS	.2590	36.79
		SNCD	1.1670	165.75
		MANP-ECODEV	.1660	23.58
		SCHOOL BOND	.9640	136.92
		LIBRARY BND	.0200	2.84
				TOTAL CURRENT TAX

PENALTY & INTEREST PENALTY & INTEREST ARE CHARGED TO DELINQUENT PAYMENTS IN ACCOR- DANCE WITH BOROUGH ORDINANCE. PENALTY ON TAXES DUE 10% ANNUAL RATE OF INTEREST 8%	DELINQUENT TAXES					
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	TOTAL
	PRIOR YEARS					

TAXES ARE DUE JULY 1 AND DELINQUENT AFTER THE DATES SHOWN BELOW.				TOTAL DUE	2,103.62
FIRST HALF	09/01/2005	1,051.81			
SECOND HALF	11/01/2005	1,051.81			

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	ASSESSMENT	AMOUNT
05	142,030	2,104	14.8110	- .4130	ASSESSED VALUE	142,030
04	124,881	1,901	15.2240	- .1790	BOROUGH RESIDENTIAL EXEMPTION	0
03	112,099	1,727	15.4030	- .0020	CITY RESIDENTIAL EXEMPTION	0
02	116,240	1,791	15.4050	+ .1450	STATE EXEMPTION	0
01	98,153	1,526	15.2600	N/A	BLDG FIRE SYS EXEMPTION	0
					VOLUNTEER EMS/FIRE EXEMPTION	0

**FOR PAYMENTS MADE AFTER THE DUE DATES, PLEASE CALL THE
TREASURY AND BUDGET DIVISION AT 907-459-1441 FOR THE CORRECT AMOUNT DUE.**

TAXPAYER:
MAKE ALL CHECKS PAYABLE TO
FAIRBANKS NORTH STAR BOROUGH.
YOUR CANCELLED CHECK WILL BE YOUR RECEIPT.

FAIRBANKS NORTH STAR BOROUGH
808 PIONEER ROAD
PHONE (907) 459-1441

PARCEL ACCT. NUMBER **0147672**

RETURN THIS STUB WITH SECOND HALF PAYMENT.

TOTAL TAXES **2,103.62**
PRIOR YEARS DELINQUENT **.00**

ADDRESS CHANGE

**DELINQUENT TAXES MUST BE PAID
WITH CASHIERS CHECK, MONEY
ORDER OR CASH.**

FIRST INSTALLMENT **1,051.81**
MUST BE PAID BY **09/01/2005**

SECOND INSTALLMENT **1,051.81**
MUST BE PAID BY **11/01/2005**

COOK DENNIS E
COOK OLGA B

01476720001051810002103628

DEC 21 2005

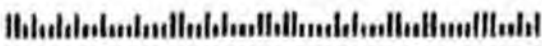
2005

FAIRBANKS NORTH STAR BOROUGH

808 PIONEER ROAD
PHONE (907) 459-1441

P O BOX 71220
FAIRBANKS ALASKA 99707-1220

TAXES ARE LEVIED FOR THE CALENDAR
YEAR JANUARY 1ST TO DECEMBER 31ST

0147681	SALCHAUKY TOWNSHIP 0484	GENERAL GOV	5.0040	263.61
1 PTH LOT 4 BLOCK 2 SALCHAUKY TOWNSHIP  COOK DENNIS E COOK OLGA B 431 BIRCH HILL RD FAIRBANKS AK 99712-1621		EDUCATION	7.2310	380.92
		KAMP-EMs	.2390	13.64
		SWCD	1.1870	61.40
		KAMP-ECODEV	.1660	8.74
		SCHOOL BOND	.9640	50.78
		LIBRARY BOND	.0200	1.05
		TOTAL CURRENT TAX	14.8110	780.22

PENALTY & INTEREST <small>PENALTY & INTEREST ARE CHARGED TO DELINQUENT PAYMENTS IN ACCORDANCE WITH BOROUGH ORDINANCE.</small> <small>PENALTY ON TAXES DUE 10%</small> <small>MONTHLY RATE OF INTEREST 8%</small>	DELINQUENT TAXES					TOTAL DUE
	YEAR	TAX	PENALTY	INTEREST	LEGAL/ADV	
	PRIOR YEARS					
TAXES ARE DUE JULY 1 AND DELINQUENT AFTER THE DATES SHOWN BELOW.						780.22
	FIRST HALF	09/01/2005	390.11			
	SECOND HALF	11/01/2005	390.11			

YEAR	ASSESSED VALUE	TAXES LEVIED	TOTAL MILL LEVY	MILL CHANGE +/-	ASSESSED VALUE	
					52,679	
05	52,679	780	14.8110	- .4130	BOROUGH RESIDENTIAL EXEMPTION	0
04	49,058	747	15.2240	- .1790	CITY RESIDENTIAL EXEMPTION	0
03	46,759	720	15.4030	- .0020	STATE EXEMPTION	0
02	45,032	694	15.4050	+ .1450	BLDG FIRE SYS EXEMPTION	0
01	41,881	651	15.2600	N/A	VOLUNTEER EMS/FIRE EXEMPTION	0

FOR PAYMENTS MADE AFTER THE DUE DATES, PLEASE CALL THE TREASURY AND BUDGET DIVISION AT 907-459-1441 FOR THE CORRECT AMOUNT DUE.

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FAIRBANKS NORTH STAR BOROUGH
808 PIONEER ROAD
PHONE (907) 459-1441

PARCEL ACCT. NUMBER **0147681**

RETURN THIS STUB WITH SECOND HALF PAYMENT.

TOTAL TAXES **780.22**
PRIOR YEARS DELINQUENT **.00**
FIRST INSTALLMENT **390.11**
MUST BE PAID BY **09/01/2005**
SECOND INSTALLMENT **390.11**
MUST BE PAID BY **11/01/2005**

ADDRESS CHANGE

DELINQUENT TAXES MUST BE PAID WITH CASHIERS CHECK, MONEY ORDER OR CASH.

COOK DENNIS E
COOK OLGA B

DEC 21 2005

01476810000390110000780227

WEDBUSH MORGAN SECURITIES

ACCOUNT NUMBER: 2451-6117 09-01-05 THRU 09-30-05 PAGE 2 OF 2

DENNIS E COOK &
OLGA B COOK JTWRDS

ACCOUNT SUMMARY

(Unpriced Securities Excluded)	PRIOR PERIOD	09-30-05
MUTUAL FUNDS: OPEN END	1,505.98	1,618.24
ACCOUNT NET WORTH	1,664.96	1,618.24

INCOME/PRINCIPAL SUMMARY	CURRENT MONTH	YEAR TO DATE
CASH DIVIDEND	3.00	10.50
TOTAL INCOME/PRINCIPAL	3.00	10.00

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ACCOUNT PORTFOLIO

QUANTITY	DESCRIPTION	SYMBOL/ CUSIP	CURRENT PRICE	CURRENT VALUE	COST BASIS	UNREALIZED GAIN OR LOSS	ESTIMATED ANNUAL INCOME	CURRENT YIELD %	
MONEY BALANCE: CREDIT									
MUTUAL FUNDS: OPEN END									
82.748	HANCOCK JOHN SOVEREIGN INVESTORS FUND CL A	SOVIX	19.52	1,615	1,700	181-	17	1.0	1
MUTUAL FUNDS: OPEN END TOTAL				1,615			17	1.0	
ACCOUNT NET WORTH				1,618			17	1.0	

ACCOUNT ACTIVITY

DATE	ACTMNTY	QUANTITY	DESCRIPTION	PRICE	AMOUNT CHARGED	AMOUNT CREDITED	
OPENING BALANCE							
09-23-05	DIVIDEND		HANCOCK JOHN SOVEREIGN INVESTORS FUND CL A 092305			3.00	1
09-23-05	REINVEST DIV	.155	HANCOCK JOHN SOVEREIGN INVESTORS FUND CL A REINVEST AT 19.400		3.00		1
CLOSING BALANCE							

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FAX NO.

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Ragen MacKenzie Division
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 Not For Client Correspondence
 P.O. Box 5275
 Sioux Falls, SD 57117-5275

AB 02 05023 11398 H 269 B

WELLS FARGO BANK IRA C/F
 DENNIS E COOK
 431 BIRCH HILL ROAD
 FAIRBANKS AK 99712-1621



CONSOLIDATED ACCOUNT SUMMARY

Financial Consultant: AFA9	Statement Period: November 1, 2005 - November 30, 2005
Contact Us At: STAMPER/BORGESON 615 CUSHMAN ST., SUITE 210 FAIRBANKS AK 99701 (907) 451-7767	Account Number: W20957185

DEC 21 2005

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Account Number	Account Name	Previous Portfolio Net Worth	Cash/ Money Markets	Securities Value	Current Portfolio Net Worth	Income This Period	Income Year-To-Date
W20857185 Last Statement: October 31, 2005 Smt Enclosed: YES	WELLS FARGO BANK IRA C/F DENNIS E COOK 431 BIRCH HILL ROAD FAIRBANKS AK 99712	\$41,084.21	\$7,619.91	\$32,754.47	\$40,374.38	\$163.18	\$701.95
W20977829 Last Statement: October 31, 2005 Smt Enclosed: YES	WELLS FARGO BANK IRA C/F OLGA B COOK 431 BIRCH HILL ROAD FAIRBANKS AK 99712	\$17,090.62	\$11,436.84	\$5,376.30	\$18,872.14	\$80.78	\$448.78
TOTAL HOUSEHOLD VALUE		\$58,174.83	\$19,116.75	\$38,129.77	\$57,246.52	\$263.96	\$1,240.73

This summary page is provided for informational purposes only. Please refer to the detailed account statement for further information. If no trading activity occurred in an account for a non-quarterly statement period, no statement for such account(s) is enclosed.

Market values and balances may include assets held away from Wells Fargo Investments, LLC ("WFI"). WFI has not verified and is not responsible to you for the accuracy of this information.

Balances and values of your account(s) may not reflect certain transactions that have been effected, but not yet posted to your account(s).

Investment and Insurance Products:

- Are NOT insured by the FDIC or any other federal government agency
- Are NOT deposits of or guaranteed by the Bank or any Bank Affiliate
- May Lose Value

Wells Fargo Investments, LLC (Member SIPC),
 a non-bank affiliate of Wells Fargo & Company.



Regen MacKenzie Division
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Blair Falls, SD 57117-6275

Retirement Account

WELLS FARGO BANK IRA C/F
DENNIS E COOK
431 BIRCH HILL ROAD
FAIRBANKS AK 99712

Financial Consultant: AFA9

Last Statement Date:
October 31, 2005

Contact Us At:
STAMPER/BORGESON
613 CUSHMAN ST., SUITE 210
FAIRBANKS AK 99701
(907) 451-7767
24-Hour Assistance: 1-866-281-7436

Account Number:
W20957185

November 1, 2005 - November 30, 2005

Portfolio Summary	Current Value	Previous Value
Money Market Funds/Cash	\$7,619.91	\$7,436.73
Stocks	\$32,754.47	\$33,647.48
Total Portfolio Value	\$40,374.38	\$41,084.21

Income Summary	November 30, 2005	Year to Date
Taxable Money Market Funds	\$20.33	\$159.82
Equity Securities & Mutual Funds	\$162.85	\$632.13
Total Income	\$183.18	\$791.95

Activity Summary	Amount
Total Asset Value as of October 31, 2005	\$41,084.21
Cash/Money Market Activity for November	
Closing Balance as of 10/31/2005	\$7,436.73
Income	\$183.18
Closing Balance as of 11/30/2005	\$7,619.91
Net Change Cash/Money Market Activity	\$183.18
Changes in Securities Value for November	
Value of Priced Securities as of 10/31/2005	\$33,647.48
Value of Priced Securities as of 11/30/2005	\$32,754.47
Net Change Securities Value	(\$893.01)
Total Asset Value as of November 30, 2005	\$40,374.38
Total Asset Value as of December 31, 2004	\$39,363.43

Investment and Insurance Products:

- Are NOT insured by the FDIC or any other federal government agency
- Are NOT deposits of or guaranteed by the Bank or any Bank Affiliate
- May Lose Value

Wells Fargo Investments, LLC (Member SIPC),
a non-bank affiliate of Wells Fargo & Company.

See Page 2 for important messages about your account.
You may also review your account information online at
<http://www.wellsfargo.com>. Ask us for details.

DEC 21 2005

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FAX NO.

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WELLS FARGO BANK IRA CF
 DENNIS E COOK
 431 BIRCH HILL ROAD
 Account number: W20057105
 Financial Consultant: STAMPER/BORGESON
 Phone Number: (907) 451-7767

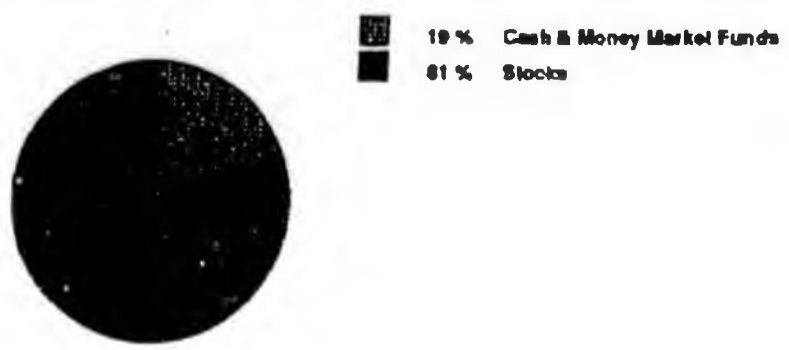
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P. 19

Current Portfolio Allocation



Important Information About Your Account

VIEW THIS STATEMENT ONLINE!
 Sign on to your Brokerage account at www.wellsfargo.com and select **Statements & Records** to view and print your present and past account statements. Select **Delivery Options** to turn off paper delivery, and receive an e-mail notification each time a new statement is available. To learn about the many other benefits of online access and for help getting started, go to: www.wellsfargo.com/uhfservice_online.

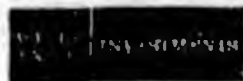
Portfolio Value

CASH & MONEY MARKET FUNDS 19%

Quantity	Description	Market Price	Market Value	Estimated Annual Income
7,619.01	WF ADVANTAGE MONEY MARKET FD CL A 30 Day Yield: 3.27%	\$1.00	\$7,619.01	\$249
Cash & Money Market Funds Subtotal			\$7,619.01	\$249

STOCKS 81%

Quantity	Description	Symbol	Market Price	Long/Short	Market Value	Estimated Annual Income
100	EDEN BIOSCIENCE CORP	EDEN	\$0.63	Long	\$63.00	
200	LTV CORP NEW	LTVQ	0.0007	Long	0.14	
1,285	NORTHRIM BANCORP INC	NRBM	2.25	Long	30,904.25	565
66	PUGET ENERGY INC NEW	PSD	20.78	Long	1,787.08	86
Stocks Subtotal					\$32,734.47	\$651



WELLS FARGO BANK IRA CF
 DENNIS E COOK
 431 BIRCH HILL ROAD
 W20057105
 Financial Consultant: STAMPE R/BORGESON
 Phone Number: (907) 451-7767

DEC 21 2005

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Cash Flow Analysis (continued)

Date	Description	Activity	Quantity	Price	Debit	Credit	Balance
11/15/05	PUGET ENERGY INC NEW	DIVIDEND				21.50	21.50
11/16/05	WF ADVANTAGE MONEY	PURCHASE		1.00	(21.50)		0.00
11/30/05	WF ADVANTAGE MONEY	DIVIDEND				20.33	20.33
11/30/05	WF ADVANTAGE MONEY	REINVEST DIV			(20.33)		0.00
Ending Cash Balance							\$0.00

IRA Account Summary & Beneficiary Designation

	Current Tax Year	Previous Tax Year
Contributions	\$0.00	N/A
Distributions	\$0.00	N/A
Rollovers	\$0.00	N/A
Tax Withheld	\$0.00	N/A

According to our records, you have designated the following beneficiaries for your retirement account. This section is provided for your informational purposes only, and reflects the latest entry in our systems as of the date this statement was produced. At the time of death, assets will be dispersed based upon the latest written designation on file. If this information is incorrect or incomplete please call your financial consultant.

Please Note, if your account is a Coverdell Education Savings Account (formerly Education IRA), please disregard this section. Wells Fargo Investments, LLC Education Savings Account Plan agreements do not allow these types of beneficiary designations.

Primary Beneficiary (ies)	Relationship	Percentage
Not available - please provide		
Contingent Beneficiary (ies)	Relationship	Percentage
None		

FAX NO.

P. 20



Regen Max Kenzie Division
 Return Mail Processing Only
 Not For Client Correspondence
 P.O. Box 5275
 Sioux Falls, SD 57117-5275

Retirement Account

WELLS FARGO BANK IRA C/F
 OLGA B COOK
 431 BIRCH HILL ROAD
 FAIRBANKS AK 99712

Financial Consultant: AFA9

Last Statement Date:
 October 31, 2005

Contact Us At:
 STAMPER/BORGESON
 613 CUSHMAN ST., SUITE 210
 FAIRBANKS AK 99701
 (907) 451-7767
 24-Hour Assistance: 1-866-261-7436

Account Number:
 W20977829

DEC 21 2005

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November 1, 2005 - November 30, 2005

Portfolio Summary	Current Value	Previous Value
Money Market Funds/Cash	\$11,496.84	\$11,416.06
Stocks	\$5,375.30	\$5,674.56
Total Portfolio Value	\$16,872.14	\$17,090.62

Activity Summary	Amount
Total Asset Value as of October 31, 2005	\$17,090.62
Cash/Money Market Activity for November	
Closing Balance as of 10/31/2005	\$11,416.06
Income	\$80.78
Closing Balance as of 11/30/2005	\$11,496.84
Net Change Cash/Money Market Activity	\$80.78
Changes in Securities Value for November	
Value of Priced Securities as of 10/31/2005	\$5,674.56
Value of Priced Securities as of 11/30/2005	\$5,375.30
Net Change Securities Value	(\$299.26)
Total Asset Value as of November 30, 2005	\$16,872.14
Total Asset Value as of December 31, 2004	\$16,852.48

Income Summary	November 30, 2005	Year to Date
Taxable Money Market Funds	\$30.78	\$248.78
Equity Securities & Mutual Funds	\$50.00	\$200.00
Total Income	\$80.78	\$448.78

Investment and Insurance Products:

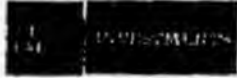
- Are NOT insured by the FDIC or any other federal government agency
- Are NOT deposits of or guaranteed by the Bank or any Bank Affiliate
- May Lose Value

Wells Fargo Investments, LLC (Member SIPC)
 a non-bank affiliate of Wells Fargo & Company.

See Page 2 for important messages about your account.
 You may also review your account information online at
<http://www.wellsfargo.com>. Ask us for details.

FAX NO.

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WELLS FARGO BANK IRA CF
 OLGA B COOK
 431 BIRCH HILL ROAD
 Account number: WF0077829
 Financial Consultant: STAMPER/BORGESON
 Phone Number: (907) 451-7767

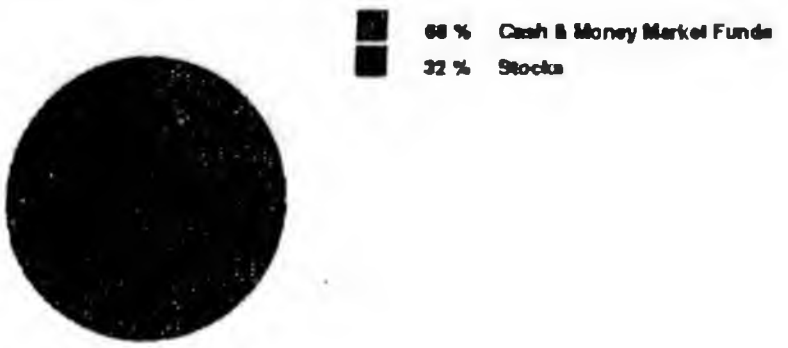
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FAX NO.

P. 22

Current Portfolio Allocation



Important Information About Your Account

VIEW THIS STATEMENT ONLINE!
 Sign on to your Brokerage account at www.wellsfargo.com and select **Statements & Records** to view and print your present and past account statements. Select **Delivery Options** to turn off paper delivery, and receive an e-mail notification each time a new statement is available. To learn about the many other benefits of online access and for help getting started, go to: www.wellsfargo.com/fullservice_online.

Portfolio Value

Quantity	Description	Market Price	Market Value	Estimated Annual Income
11,496.84	WF ADVANTAGE MONEY MARKET FD CL A 30 Day Yield 3.27%	\$1.00	\$11,496.84	\$376
Cash & Money Market Funds Subtotal			\$11,496.84	\$376

Quantity	Description	Symbol	Market Price	Long/Short	Market Value	Estimated Annual Income
150	ALBERTSONS INCORPORATED	ABS	\$23.50	Long	\$3,525.00	\$114
200	ASSOCIATES FIRST CAP CORP RESIDUAL VALUE OBLG	ASFZ	0.0004	Long	0.08	
100	EDEN BIOSCIENCE CORP	EDEN	0.63	Long	63.00	
200	LTV CORP NEW	LTVQ	0.0007	Long	0.14	
86	PUGET ENERGY INC NEW	PSD	20.78	Long	1,787.08	86
Stocks Subtotal					\$5,375.30	\$200



WELLS FARGO BANK IRA C/F
 OLGA B COOK
 431 BIRCH HILL ROAD
 Account number: W20077829
 Financial Consultant: STAMPER/BORGESON
 Phone Number: (807) 451-7757

DEC 21 2005

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Cash Flow Analysis (continued)

CHRONOLOGICAL TRANSACTION SUMMARY (continued)

Date	Description	Activity	Quantity	Price	Debit	Credit	Balance
11/15/05	PUGET ENERGY INC NEW	DIVIDEND				21.50	21.50
11/16/05	WF ADVANTAGE MONEY	PURCHASE		1.00	(21.50)		0.00
11/30/05	WF ADVANTAGE MONEY	DIVIDEND				30.78	30.78
11/30/05	WF ADVANTAGE MONEY	REINVEST DIV			(30.78)		0.00
Ending Cash Balance							\$0.00

IRA Account Summary & Beneficiary Designation

	Current Tax Year	Previous Tax Year
Contributions	\$0.00	N/A
Distributions	\$0.00	N/A
Rollovers	\$0.00	N/A
Tax Withheld	\$0.00	N/A

According to our records, you have designated the following beneficiaries for your retirement account. This section is provided for your informational purposes only, and reflects the latest entry in our system as of the date this statement was produced. At the time of death, assets will be dispersed based upon the latest written designation on file. If this information is incorrect or incomplete please call your financial consultant.

Please Note, if your account is a Coverdell Education Savings Account (formerly Education IRA), please disregard this section. Wells Fargo Investments, LLC Education Savings Account Plan agreements do not allow these types of beneficiary designations.

Primary Beneficiary (ies) Relationship Percentage
 Not available - please provide

Contingent Beneficiary (ies) Relationship Percentage
 None

FAX NO.

P. 23

CONFIRM.

SELECT

COMMITTEE

ON LEG.

ETHICS,

LINDSEY

HOLMES,

1/06

LINDSEY S. HOLMES

4149 Hood Court • Anchorage, Alaska 99517

Work (907) 276-8095 • Home (907) 245-1022 • Cellular (907) 317-3697 • E-mail: Lholmes@risealaska.com

- EDUCATION** **UNIVERSITY OF CHICAGO LAW SCHOOL,** Chicago, IL
1998-2001 *J.D. with honors*
Chicago Journal of International Law, International Law Society President
- 1995-1996 **STANFORD UNIVERSITY,** Stanford, CA
M.A. in Latin American Studies
- 1991-1995 **MIDDLEBURY COLLEGE,** Middlebury, VT
B.A. in Political Science and Spanish
cum laude, Honors in Political Science, National Spanish Honor Society, varsity tennis team
- EXPERIENCE** **RISE ALASKA,** Anchorage, AK
2005-present *Project Manager*
• Specializing in public involvement, National Environmental Policy Act (NEPA) and technical writing
- 2003-2005 **HELLER EHRMAN WHITE & MCAULIFFE,** Anchorage, AK
Attorney
• Focus on energy and real estate law
- 2002-2003 **ASHBURN & MASON,** Anchorage, AK
Attorney
• Focus on real estate, development, commercial leases
- 2001-2002 **ALASKA SUPREME COURT,** Anchorage, AK
Law Clerk for Justice Warren W. Matthews
- 1999-2000 **LAKER & MCKENZIE,** Chicago, IL and Barcelona, Spain
Summer Associate and Part-Time Law Clerk
Focus on international corporate law
- 1998 **RPA MEXICO,** Mexico City, *Sales and Marketing for retail design firm*
1996-1997 **CETEI,** Mexico City, *International Sales and Marketing Manager for technology company*
Summer 1994 **LAW OFFICES OF C. DEMING COWLES,** Washington, D.C. *Legislative Assistant*
- LANGUAGES** Fluent in Spanish
- ADMISSIONS** Admitted to practice law in the State of Alaska
- COMMUNITY INVOLVEMENT** The Nature Conservancy, Alaska Chapter – Board of Trustees
YWCA of Anchorage – Board Member & Women of Achievement Committee Member
Anchorage Chamber of Commerce – Board Member
Anchorage Downtown Rotary – Member, Foundation Event Committee, Youth Exchange Committee
Anchorage Concert Foundation – Board Member
Conference of Alaskans – Delegate
2003 Recipient of “Alaska’s Top 40 Under 40” Award
Anchorage Association of Women Lawyers – Past Treasurer
Highland Tech High School – Past Academic Policy Board Chair

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ALASKA PUBLIC OFFICES COMMISSION
2221 E. NORTHERN LIGHTS, #128
ANCHORAGE, AK 99508-4149
907/276-4176 • FAX: 276-7018

ARRIVED

JAN 11 2006

APOC - ANCH FAX

1-11-06

2006 LEGISLATIVE FINANCIAL DISCLOSURE STATEMENT
(AS 24.60.200 - 24.60.260)

INFORMATION ABOUT HOW TO COMPLETE THIS REPORT

- ◆ This report is for incumbent legislators, legislative directors and public members of the Select Committee on Legislative Ethics.
- ◆ This report covers the preceding calendar year, so include only information about financial interests held and business involvement's between January 1, 2005 and December 31, 2005.
- ◆ You must show your own financial interests and those held by your spouse or domestic partner, dependent children and nondependent children living with you during calendar year 2005.
- ◆ If you need additional space to complete this report, use copies of the pages needed.
- ◆ The LFD Manual contains useful information about how to complete this report.
- ◆ If you have any questions or need help completing the form, refer to the instruction manual.
- ◆ If you still need help, call APOC at 907/276-4176.

SIGN THIS REPORT ON THE LAST PAGE. THIS REPORT IS DUE March 15, 2006.

Members of the Select Committee on Legislative Ethics file on January 9, 2006.

BACKGROUND INFORMATION

NAME: Lindsey Holmes Phone Number _____ Fax Number _____

OCCUPATION: Attorney/Project Manager

MAILING ADDRESS: RISE Alaska, LLC 880 H Street, Suite 101 lholmes@risealaska.com
(Street Address or Post Office Box) E-Mail Address

Anchorage, AK 99501
(City/Town and Zip Code)

Day Phone Number 907-276-8095 Day Fax Number 907-276-8609

OFFICE HELD (Check One): Legislator Legislative Director
 Public member of the Select Committee on Legislative Ethics

TITLE: Public supporter

FAMILY MEMBER INFORMATION (list names):

SPOUSE OR DOMESTIC PARTNER: n/a

DEPENDENT CHILDREN: n/a

NONDEPENDENT CHILDREN: n/a

PC

**SCHEDULE A
SOURCES OF INCOME OVER \$5000**

Salaried Employment

If NONE reportable, check box

Report the name and address of each employer who paid you, your spouse or domestic partner, dependent children or nondependent children living with you more than \$5000 during calendar year 2005.

List your employment as a legislator or legislative director, and each source of salaried income over \$5000 for you, your spouse, domestic partner, dependent children and nondependent children living with you. You are not required to disclose the amount of salary received by your family members or the salary you received from your state employment.

Provide enough detail when describing the nature of services to tell a reader what work was performed for the salary received.

Report the amount of income you received when your employer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity, or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.
See pages 6-8 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Employer's Name: Heller Ehrman White & McCullough, LLP

Employer's Address: 510 L Street, suite 500, Anchorage, AK 99501

Nature of Services Provided: Legal (attorney)

Amount: \$ 10,600

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Employer's Name: RISE Alaska LLC

Employer's Address: 380 H Street, suite 101, Anchorage, AK 99501

Nature of Services Provided: Project management/public involvement

Amount: \$ 83,855

Name of filer, spouse, domestic partner, or child: _____

Employer's Name: _____

Employer's Address: _____

Nature of Services Provided: _____

Amount: \$ _____

SCHEDULE A SOURCES OF INCOME OVER \$5000

Self-Employment

If NONE reportable, check box

Self-employment results when the person whose income is being reported worked in any of the following: a corporation in which you, your spouse, domestic partner, dependent children, nondependent children living with you or a combination of them held a controlling interest, or a sole proprietorship, limited liability company, partnership, or professional corporation in which the person whose income is being reported has an ownership interest.

List the name, address, and nature of services provided for each self-employment source of income from whom more than \$5000 was received in compensation for personal services by you or a family member. Provide enough detail when describing the nature of services to tell a reader what work was performed for the compensation received.

If the business is non-retail, list the nature of services performed and the name and address of each client or customer who paid the business over \$5000 during calendar year 2005.

Report the amount of income you received from a client, patient or customer when the client, patient, or customer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government's entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.
See pages 8-10 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: _____

Business Name: _____

Retail Non-Retail (If you check non-retail, list clients/customers, and amounts if required, below.)

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

SCHEDULE A SOURCES OF INCOME OVER \$5000

Dividends and Interest

If NONE reportable, check box

Report the name of the source of all dividends, interest and capital gains over \$5000 earned during calendar year 2005, (excluding retirement accounts) such as S.B. Money Market Acct or CD's in ABC Bank.

- List the name(s) of the asset(s) (not in a retirement account) which paid you, your spouse, domestic partner, child or nondependent child living with you, dividends, interest or capital gains of more than \$5000 such as IBM stock or Cordova Municipal Bonds.
- (Report the assets of a retirement account or trust on page 8)

See page 13 of the LFD manual for more help with this section.

Recipient (filer, spouse, domestic partner, or child)

Name of Source of Income

Rental Income

If NONE reportable, check box

List the first and last name of each tenant from whom over \$5000 was received during calendar year 2005. If property is located outside Alaska and managed by a person other than you, your spouse, domestic partner, dependent child or nondependent child living with you, you may list the managing agent instead of listing each tenant.

See page 14 of the LFD manual for more help with this section.

Owner (filer, spouse, domestic partner, or child)

Tenant(s)

Other Income

If NONE reportable, check box

List each source of income over \$5000 not listed elsewhere on this statement, including income from the sale of real property; social security; retirement; the assets of an IRA cash-out; the name of the person who paid alimony or child support; government entitlements; honoraria and shared living

See page 14 of the LFD manual for more help.

Recipient (filer, spouse, domestic partner, or child)

Name of Source

Peter Wemeler

JAN 11

SCHEDULE B BUSINESS INTERESTS

Business Interests

If NONE reportable, check box

Report all business relationships even if they were not sources of income to you, your spouse, domestic partner, dependent child or nondependent child living with you during calendar year 2005.

- List ownership interests of more than \$5000 as a shareholder in publicly traded stocks, regardless of income, that are not listed elsewhere on this Statement. (A list of the names of publicly traded stocks such as IBM or Microsoft may be listed by name only on a separate page.)
- List interests in limited liability companies or as a sole proprietor, shareholder, owner, partner, officer, or director including native corporations.
- List involvements in profit and non-profit organizations as an officer or director.

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

See page 16 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Business Name: Anchorage Chamber of Commerce

Business Address: 441 W. 5th Avenue, suite 300, Anchorage, AK 99501

Nature of Interest: Anchorage Chamber of Commerce

Description of Business's Activity: chamber of commerce

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Business Name: Anchorage Concert Foundation

Business Address: 430 W. 7th Avenue, suite 200, Anchorage, AK 99501

Nature of Interest: member board of directors

Description of Business's Activity: provides financial support to Anchorage Concert Association

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Business Name: Anchorage Rotary Club

Business Address: P.O. Box 101504, Anchorage, AK 99510-1504

Nature of Interest: member

Description of Business's Activity: charitable/service organization

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Business Name: YWCA of Anchorage

Business Address: 324 E. 5th Avenue, Anchorage, AK 99501

Nature of Interest: member board of directors

Description of Business's Activity: charitable organization

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Business Name: The Nature Conservancy - Alaska Chapter

Business Address: 715 L Street, suite 100, Anchorage, AK 99501

Nature of Interest: member board of trustees

Description of Business's Activity: environmental organization

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P. 08

FAX NO.

JAN-11-2006 WED 02:33 PM

7-181 P. 087/011 F-087

907212690

01-11-06 00:10AM FROM-Rise Alaska

Name of Tier, spouse, domestic partner, or child:

Timothy Holmes

Business Name:

Plaza, Inc.

Business Address:

235 East 42nd Street, New York, NY 10017-5755

Nature of Interest:

Stockholder

Description of Business's Activity:

Plaza Mac Medical Company

JAN 11 2006

2006 Legislative Financial Disclosure Statement

SCHEDULE B REAL PROPERTY INTERESTS

Real Property Interests

If NONE reportable, check box

Report all real property interests, such as your home, neighboring lots, rent to own home, rental property, vacant property, recreational property, business property or limited partnerships including real estate held through a trust or sold during calendar year 2006.

Include a street address, city and state or a complete legal description for each piece of property listed.

Use copies of this page if you need additional space to complete this section.

See page 17 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: Lindsey Holmes

Street Address or Legal Description: 4142 Hood Court

City or Borough and State: Anchorage AK

Nature of Interest: own cabin residential
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____

Street Address or Legal Description: _____

City or Borough and State: _____

Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____

Street Address or Legal Description: _____

City or Borough and State: _____

Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____

Street Address or Legal Description: _____

City or Borough and State: _____

Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____

Street Address or Legal Description: _____

City or Borough and State: _____

Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

SCHEDULE C LOANS, LOAN GUARANTEES, AND DEBTS Of More Than \$5000

Loans, Loan Guarantees, and Debts

If NONE reportable, check box

Report the names of each creditor or lender to whom more than \$5000 was owed during any part of the prior calendar year by you, your spouse, domestic partner, dependent children or nondependent children living with you.

List financial obligations including mortgages on property sold during calendar year 2005; loans that have been guaranteed, delinquent notes, alimony, child support payments; medical bills; mortgage, boat and auto loans; business and personal loans; carrow's; student loans; signature loans; and promissory notes. Loans include secured, unsecured and contingent loans. Do not report credit card obligations or revolving charge accounts.

Circle whether the entity is a lender, creditor or guarantor.

See page 18 of the LFD manual for more information about the reporting requirements.

Lindsay Holmes
Name of Debtor (filer, spouse, domestic partner or child)

Wells Fargo Home Mortgage
Name of Lender/Creditor/Guarantor

Lindsay Holmes
Name of Debtor (filer, spouse, domestic partner or child)

Alaska USA Federal Credit Union
Name of Lender/Creditor/Guarantor

Name of Debtor (filer, spouse, domestic partner or child)

Name of Lender/Creditor/Guarantor

Name of Debtor (filer, spouse, domestic partner or child)

Name of Lender/Creditor/Guarantor

LOANS, and LOAN GUARANTEES, Of More Than \$1000

Report the address of the creditor or lender, the original amount of the obligation, current balance owed, interest rate, length of the loan, and whether a written loan agreement exists for a creditor or lender who:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.

See page 18 of the LFD manual for more information about the reporting requirements.

Source of a loan or loan guarantee that had a substantial interest in legislative, administrative or political actions.

Name of Debtor (filer, spouse, domestic partner, or child)

Name of Lender/Creditor

\$ _____
Original Amount Owed

\$ _____
Balance Owed

Address of Lender/Creditor

_____%
Interest Rate

Length of Loan Years

Does written loan agreement exist? YES NO

**SCHEDULE C
BENEFICIAL INTEREST IN RETIREMENT ACCOUNTS/TRUSTS
Exceeding \$5000**

Retirement Accounts Trusts

If NONE reportable, check box

Report each beneficial interest in a retirement account or trust during calendar year 2006 for you, your spouse, domestic partner, dependent children or nondependent children living with the filer. Trusts include employee benefit accounts (union and profit-sharing accounts), retirement accounts (IRA, 401K, SEP, Keogh) and family trust funds. Assets of a trust/retirement account include stocks, bonds, mutual funds, cash accounts, CD's, real property, and interests in limited partnerships.

- Name the trustor (the person who provided the funds or assets for the trust).
- List the assets by name such as IBM stock or Templeton Growth Fund

See page 20 of the LFD manual for more help.

Lindsay Holmes 100%
Name of filer, spouse, domestic partner or child: Extent of Interest (Percent)

State of Alaska & Lindsay Holmes (50-50)
Name of the person, employer or entity who provided the funds or assets (Trustor)

SBS
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

Lindsay Holmes 100%
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

Lindsay Holmes
Name of the person, employer or entity who provided the funds or assets (Trustor)

Roth IRA: American Funds mutual funds
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

Lindsay Holmes 100%
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

Lindsay Holmes
Name of the person, employer or entity who provided the funds or assets (Trustor)

401(k): American Funds mutual funds
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

Lindsay Holmes 100%
Name of filer, spouse or domestic partner, or child: Extent of Interest (Percent)

Charles M. Sailor (great-grandfather)
Name of the person, employer or entity who provided the funds or assets (Trustor)

Stocks: Alliant Energy Corp., Allstate Corp., ArvinMeritor Inc., AT&T Inc., Belcouth Corp., Boeing Company, BP PLC, Coca Cola Company, Duke Energy Corp., ExxonMobil Corp., International Business Machines Corp., Pfizer Inc., Rockwell Automation Inc., Rockwell Collins Inc., Verizon Communications Company, Vodafone Group PLC
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

JAN 11

SCHEDULE C GOVERNMENT CONTRACTS AND LEASES CERTIFICATION

Contracts and Offers to Contract

If NONE reportable, check box

List all contracts and offers to contract with the state or instrumentality of the state during calendar year 2005 held, bid or offered. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 21 of the LFD manual for more help.

Name(s) of Contractor

Contracting Agency/Department

Indicate: Bid, held or offer made

Contract number and description

Natural Resource Leases

If NONE reportable, check box

List all natural resource leases, including mineral, timber, or oil leases bid held or offered during calendar year 2005. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 22 of the LFD manual for more help.

Leaseholder

Nature of Lease

Indicate: Bid, held or offer made

Identity of Lease and Description

CERTIFICATION

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

SIGNATURE

January 11, 2006

DATE

Lindsay Holmes
Printed Name of Filer

Anchorage, AK
Place

File this Statement with the

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

OR

ALASKA PUBLIC OFFICES COMMISSION
PO Box 110222
Juneau, AK 99811-0222
240 Main, Rm. 201
Telephone 907/465-4864
FAX 907/465-4832

JAN 11

CONFIRM.

SELECT

COMMITTEE

ON LEG.

ETHICS,

MARIANNE

STILLNER,

3-9-05

ALASKA STATE SENATE



Session:
State Capitol
Juneau, Alaska 99801-1182
(907) 465-2327
(907) 465-5241 Fax

Interim:
119 N. Cushman, Suite 201
Fairbanks, Alaska 99701
(907) 456-8161
Senator_Ralph_Seekins@legis.state.ak.us

SENATE JUDICIARY COMMITTEE

Senator Ralph Seekins, Chairman

REPORT ON RECOMMENDATION OF APPOINTMENTS

March 9, 2005

The Honorable Ben Stevens
President of the Senate
State Capitol
Juneau, Alaska 99801-1182

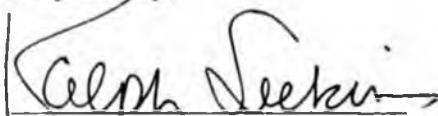
Dear President Stevens:

In accordance with AS 39.05.080, the Senate Judiciary Committee reviewed the following and recommends the appointment be forwarded to the Senate floor or to a joint session (whichever applies) for consideration:

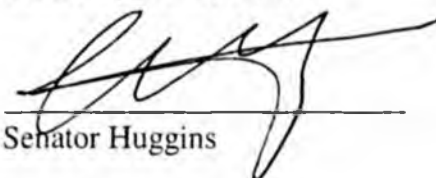
Select Committee on Legislative Ethics: Marianne Stillner

This does not reflect an intent by any of the members to vote for or against the individual during any further session(s).


Respectfully,



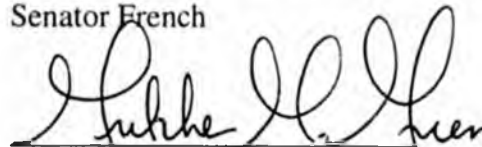
Senator Seekins, Chair



Senator Huggins



Senator French



Senator Guess

Senator Therriault

MARIANNE KOCH STILLNER
PO BOX 211433
AUKE BAY, AK 99823
907-789-7807

Objective: To provide skilled professional nursing and nurse aide education to the Juneau, AK area in order to address the increasing need for nursing at all skill levels.

Education:

Post-graduate Pediatric Nurse Practitioner Program <i>University of Kentucky</i>	1997
Master of Science in Child Psychiatric Nursing <i>Boston University</i>	1972
Bachelor of Science in Nursing <i>Mercy College of Detroit</i>	1965

Professional Responsibilities:

Develop, prepare and present the didactic information needed for training certified nurse aides. Organize and supervise the nursing clinical experiences in two long-term care facilities and one general hospital. Setup laboratory space and equipment for practice of the various nurse aide and registered nursing skills. Perform the advisory and administrative functions of an assistant professor in a university system. Participate in the development of the UAS/UAA nursing education partnership in Southeast Alaska.

Perform screening physical exams and evaluations, and provide ambulatory adolescent care to male youths admitted to a juvenile justice system.

Prepare lectures/clinical experience and examinations for courses on Physical Assessment of Adults and Children and Adaptation to Acute and Chronic Illness for a BSN program.

Serve as a public health field nurse for home visits to assess child growth and development and provide counseling; to promote elderly health through health maintenance clinics; to provide peri-natal education and newborn assessment; to provide TB case finding, medication supervision and education.

Perform triage, therapeutic intervention, referral and consultation to Alaskan village schools. Participate in training of Yupik Mental Health Aids in areas of child development, therapeutic techniques with children and consultation the school systems.

Serve as primary field worker responsible for clinical case finding and assessment of homes and child rearing practices; collaborate with psychologists and nutritionists in an inner-city failure-to-thrive study.

Provide general school nursing duties in a summer program for Boston elementary school children needing remedial education.

Provide health education and assessment through home and school visits as a public health nurse in two large inner cities and for a community of Arapaho and Shoshone Indians.

Employment:	<i>University of Alaska Southeast</i>	1/00 – current
	Assistant Professor of Nursing	
	<i>Kentucky Department of Juvenile Justice</i>	1998-1999
	Pediatric Nurse Practitioner	
	<i>Midway College</i>	1997-1998
	Instructor, BSN program	
	<i>Lexington Fayette Co Health Department</i>	1993-1998
	Public Health Nurse, Field Services	
	<i>Yukon-Kuskokwim Health Corp.</i>	1973-1975
Child Psychiatric Nurse specialist		
<i>Massachusetts Institute of Technology</i>	1972-1973	
Research Assistant, Dept. of Nutrition		
<i>Boston School System</i>	summer '71	
School Nurse		
<i>Wind River Indian Reservation</i>	1967-1968	
Public Health Nurse		
<i>Alameda Co. Health Dept.</i>	1966-1967	
Public Health Nurse		
<i>Detroit City-Co Health Dept.</i>	1965-1966	
Public Health Nurse		
Professional Activities:	Alaska Nurses Association, member	2000-current
	National Association of Pediatric Nurse Practitioners, member	1997-2002
	Kentucky Nurses Association, District 2 KNA secretary	1992-1999 1995-1997
Volunteer Activities:	UAS Faculty Liaison, Native Education	current
	University of Kentucky Hospital Auxiliary member & president	
	Fayette County Medical Auxiliary	
	Christ Church Cathedral Choir Guild founding member & president	
	Christ Church Cathedral Music Committee	
	The Lexington School Parents' Committee member & president	
Lexington Youth Soccer Association		

ARRIVED

DEC 17 2004

2005 LEGISLATIVE FINANCIAL DISCLOSURE STATEMENT
(AS 24.60.200 - 24.60.260)

APOC-ANCH
PM HC FAX
12-14-04

INFORMATION ABOUT HOW TO COMPLETE THIS REPORT

- ◆ This report is for incumbent legislators, legislative directors and public members of the Select Committee on Legislative Ethics.
- ◆ This report covers the preceding calendar year, so include only information about financial interests held and business involvement's **between January 1, 2004 and December 31, 2004.**
- ◆ You must show your own financial interests and those held by your spouse or domestic partner, dependent children and nondependent children living with you during calendar year 2004.
- ◆ If you need additional space to complete this report, use copies of the pages needed.
- ◆ The LFD Manual contains useful information about how to complete this report.
- ◆ If you have any questions or need help completing the form, refer to the instruction manual.
- ◆ If you still need help, call APOC at 907/276-4176.

SIGN THIS REPORT ON THE LAST PAGE. THIS REPORT IS DUE **March 15, 2005.**

Members of the Select Committee on Legislative Ethics file on **January 10, 2005.**

BACKGROUND INFORMATION

NAME: MARIANNE STILLNER 789-7807 465-6571
OCCUPATION: Ass't. Professor of Nursing
MAILING ADDRESS: P.O. Box 211433 Stillner@qci.net
AKUC Bay AK 99821
Day Phone Number 465-8775 Day Fax Number 465-8571
OFFICE HELD (Check One): Legislator Legislative Director
 Public member of the Select Committee on Legislative Ethics
TITLE: Public Member
FAMILY MEMBER INFORMATION (list names):
SPOUSE OR DOMESTIC PARTNER: Vernon Stillner
DEPENDENT CHILDREN: 0
NONDEPENDENT CHILDREN: 0

SCHEDULE A
SOURCES OF INCOME OVER \$5000

Salaried Employment

If NONE reportable, check box

Report the name and address of each emp'oyer who paid you, your spouse or domestic partner, dependent children or nondependent children living with you more than \$5000 during calendar year 2004.

List your employment as a legislator or legislative director, and each source of salaried income over \$5000 for you, your spouse, domestic partner, dependent children and nondependent children living with you. You are not required to disclose the amount of salary received by your family members or the salary you received from your state employment.

Provide enough detail when describing the nature of services to tell a reader what work was performed for the salary received.

Report the amount of income you received when your employer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.
See pages 6-8 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: MARIANNE

Employer's Name: U. A. S.

Employer's Address: Career Education 11120 Glacier Highway 99801

Nature of Services Provided: Health Science instruction

Amount: \$ 44,000 (approx)

Name of filer, spouse, domestic partner, or child: VERNER

Employer's Name: BARTLETT Regional Hospital

Employer's Address: 3260 Hospital Dr. JUNEAU 99801

Nature of Services Provided: PSYCHIATRIC

Amount: \$ 200,000 (approx)

Name of filer, spouse, domestic partner, or child: _____

Employer's Name: _____

Employer's Address: _____

Nature of Services Provided: _____

Amount: \$ _____

DEC 17 2004

SCHEDULE A
SOURCES OF INCOME OVER \$5000

Self-Employment

If NONE reportable, check box

Self-employment results when the person whose income is being reported worked in any of the following: a corporation in which you, your spouse, domestic partner, dependent children, nondependent children living with you or a combination of them held a controlling interest, or a sole proprietorship, limited liability company, partnership, or professional corporation in which the person whose income is being reported has an ownership interest.

List the name, address, and nature of services provided for each self-employment source of income from whom more than \$5000 was received as compensation for personal services by you or a family member. Provide enough detail when describing the nature of services to tell a reader what work was performed for the compensation received.

If the business is non-retail, list the nature of services performed and the name and address of each client or customer who paid the business over \$5000 during calendar year 2004.

Report the amount of income you received from a client, patient or customer when the client, patient, or customer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.
See pages 8-10 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: _____

Business Name: _____

Retail Non-Retail (If you check non-retail, list clients/customers, and amounts if required, below.)

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

DEC 17 2004

**SCHEDULE A
SOURCES OF INCOME OVER \$5000**

Dividends and Interest

If NONE reportable, check box ⇒

Report the name of the source of all dividends, interest and capital gains over \$5000 earned during calendar year 2004, (excluding retirement accounts) such as S.B. Money Market Acct or CD's in ABC Bank.

- List the name(s) of the asset(s) (not in a retirement account) which paid you, your spouse, domestic partner, child or nondependent child living with you, dividends, interest or capital gains of more than \$5000 such as IBM stock or Cordova Municipal Bonds.
- (Report the assets of a retirement account or trust on page 8)

See page 13 of the LFD manual for more help with this section.

Recipient (filer, spouse, domestic partner, or child)

Name of Source of Income

Rental Income

If NONE reportable, check box ⇒

List the first and last name of each tenant from whom over \$5000 was received during calendar year 2004. If property is located outside Alaska and managed by a person other than you, your spouse, domestic partner, dependent child or nondependent child living with you, you may list the managing agent instead of listing each tenant.

See page 14 of the LFD manual for more help with this section.

Owner (filer, spouse, domestic partner, or child)

Tenant(s)

Other Income

If NONE reportable, check box ⇒

List each source of income over \$5000 not listed elsewhere on this statement, including income from the sale of real property; social security; retirement; the assets of an IRA cash-out; the name of the person who paid alimony or child support; government entitlements; honoraria and shared living expenses.

See page 14 of the LFD manual for more help.

Recipient (filer, spouse, domestic partner, or child)

Name of Source

**SCHEDULE B
BUSINESS INTERESTS**

Business Interests

If NONE reportable, check box

Report all business relationships even if they were not sources of income to you, your spouse, domestic partner, dependent child or nondependent child living with you during calendar year 2004.

- List ownership interests of more than \$5000 as a shareholder in publicly traded stocks, regardless of income, that are not listed elsewhere on this Statement. (A list of the names of publicly traded stocks such as IBM or Microsoft may be listed by name only on a separate page.)
- List interests in limited liability companies or as a sole proprietor, shareholder, owner, partner, officer, or director including native corporations.
- List involvements in profit and non-profit corporations as a director or officer.

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

See page 16 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: MARIANNE
Business Name: Fayette Co. Medical Auxiliary INVESTMENT Club
Business Address: Lexington, Ky 40502
Nature of Interest: Member
Description of Business's Activity: STOCK INVESTMENT

Name of filer, spouse, domestic partner, or child: _____
Business Name: _____
Business Address: _____
Nature of Interest: _____
Description of Business's Activity: _____

Name of filer, spouse, domestic partner, or child: _____
Business Name: _____
Business Address: _____
Nature of Interest: _____
Description of Business's Activity: _____

Name of filer, spouse, domestic partner, or child: _____
Business Name: _____
Business Address: _____
Nature of Interest: _____
Description of Business's Activity: _____

Name of filer, spouse, domestic partner, or child: _____
Business Name: _____
Business Address: _____
Nature of Interest: _____
Description of Business's Activity: _____

**SCHEDULE B
REAL PROPERTY INTERESTS**

Real Property Interests

If NONE reportable, check box

Report all real property interests, such as your home, neighboring lots, rent to own home, rental property, vacant property, recreational property, business property or limited partnerships including real estate held through a trust or sold during calendar year 2004.

Include a street address, city and state or a complete legal description for each piece of property listed.

Use copies of this page if you need additional space to complete this section.

See page 17 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: MARIANNE / VERNER
Street Address or Legal Description: 2810 FURTZ CVC RD.
City or Borough and State: JUNEAU, AK 99801
Nature of Interest: buy home
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
Street Address or Legal Description: _____
City or Borough and State: _____
Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
Street Address or Legal Description: _____
City or Borough and State: _____
Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
Street Address or Legal Description: _____
City or Borough and State: _____
Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
Street Address or Legal Description: _____
City or Borough and State: _____
Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

DEC 17 2004

**SCHEDULE C
LOANS, LOAN GUARANTEES, AND DEBTS
Of More Than \$5000**

Loans, Loan Guarantees, and Debts

If NONE reportable, check box

Report the name of each creditor or lender to whom more than \$5000 was owed during any part of the prior calendar year by you, your spouse, domestic partner, dependent children or nondependent children living with you.

List financial obligations including mortgages on property sold during calendar year 2004; loans that have been guaranteed, delinquent taxes, alimony, child support payments; medical bills; mortgage, boat and auto loans; business and personal loans; escrow's; student loans; signature loans; and promissory notes. Loans include secured, unsecured and contingent loans. Do not report credit card obligations or revolving charge accounts.

Circle whether the entity is a lender, creditor or guarantor.

See page 18 of the LFD manual for more information about the reporting requirements.

MARIANNE / VEENER
Name of Debtor (filer, spouse, domestic partner or child)

WELLS FARGO Home MORTGAGE Co.
Name of Lender/Creditor/Guarantor

Name of Debtor (filer, spouse, domestic partner or child)

Name of Lender/Creditor/Guarantor

Name of Debtor (filer, spouse, domestic partner or child)

Name of Lender/Creditor/Guarantor

Name of Debtor (filer, spouse, domestic partner or child)

Name of Lender/Creditor/Guarantor

LOANS, and LOAN GUARANTEES, Of More Than \$1000

Report the address of the creditor or lender, the original amount of the obligation, current balance owed, interest rate, length of the loan, and whether a written loan agreement exists for a creditor or lender who:

- **Hired a lobbyist or was a lobbyist;**
- **Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;**
- **Was a municipality or local government entity; or**
- **Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.**

Use copies of this page if you need additional space to complete this section.

See page 18 of the LFD manual for more information about the reporting requirements.

Source of a loan or loan guarantee that had a substantial interest in legislative, administrative or political actions.

Name of Debtor (filer, spouse, domestic partner, or child)

Name of Lender/Creditor

\$ _____
Original Amount Owed

\$ _____
Balance Owed

Address of Lender/Creditor

_____ % _____ Years
Interest Rate Length of Loan

Does written loan agreement exist? YES NO

DEC 17 2004

**SCHEDULE C
BENEFICIAL INTEREST IN RETIREMENT ACCOUNTS/TRUSTS
Exceeding \$5000**

Retirement Accounts Trusts

If NONE reportable, check box

Report each beneficial interest in a retirement account or trust during calendar year 2004 for you, your spouse, domestic partner, dependent children or nondependent children living with the filer. Trusts include employee benefit accounts (pension and profit-sharing accounts), retirement accounts (IRA, 401K, SEP, Keogh) and family trust funds. Assets of a trust/retirement account include stocks, bonds, mutual funds, cash accounts, CD's, real property, and interests in limited partnerships.

- Name the trustor (the person who provided the funds or assets for the trust).
- List the assets by name such as IBM stock or Templeton Growth Fund

See page 20 of the LFD manual for more help.

MARIANNE _____ 100% _____
Name of filer, spouse, domestic partner or child: Extent of Interest (Percent)

STATE OF AR. _____
Name of the person, employer or entity who provided the funds or assets (Trustor)

TAA CREF _____
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

MARIANNE _____ 100% _____
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

MARIANNE _____
Name of the person, employer or entity who provided the funds or assets (Trustor)

HEWLETT-PACKARD / P FIDEL _____
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

VERNER _____ 100% _____
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

UNIVERSITY OF KENTUCKY _____
Name of the person, employer or entity who provided the funds or assets (Trustor)

TAA CREF / CHAS SCHWAB MONEY MKT. _____
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

VERNER _____ 100% _____
Name of filer, spouse or domestic partner, or child: Extent of Interest (Percent)

STATE OF AR. _____
Name of the person, employer or entity who provided the funds or assets (Trustor)

PERCS _____
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

Name of filer, spouse or domestic partner, or child: Extent of Interest (Percent)

Name of the person, employer or entity who provided the funds or assets (Trustor)

Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

DEC 17 2004

**SCHEDULE C
GOVERNMENT CONTRACTS AND LEASES
CERTIFICATION**

Contracts and Offers to Contract

If NONE reportable, check box

List all contracts and offers to contract with the state or instrumentality of the state during calendar year 2004 held, bid or offered. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.

See page 21 of the LFD manual for more help.

ARRIVED

JAN 1 2 2005

Name(s) of Contractor

Contracting Agency/Department

Indicate: Bid, held or offer made

Contract number and description

APOC - ANCH
PMY HC FAX
110-05

Natural Resource Leases

If NONE reportable, check box

List all natural resource leases, including mineral, timber, or oil leases bid held or offered during calendar year 2004. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member, or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.

See page 22 of the LFD manual for more help.

Leaseholder

Nature of Lease

Indicate: Bid, held or offer made

Identity of Lease and Description

CERTIFICATION

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

Marianne Stillner
SIGNATURE

12/31/04
DATE

MARIANNE STILLNER
Printed Name of Filer

Juneau
Place

File this Statement with the

ALASKA PUBLIC OFFICES COMMISSION
2221 E. Northern Lights #128
Anchorage, AK 99508-414
Telephone 907/276-4176
FAX 907/276-7018

OR

ALASKA PUBLIC OFFICES COMMISSION
PO Box 110222
Juneau, AK 99811-0222
240 Main, Rm. 201
Telephone 907/465-4864
FAX 907/465-4832

DEC 17 2004

CONFIRM.

SELECT

COMMITTEE

ON LEG.

ETHICS,

HERMAN

WALKER,

1/06

HERMAN GENE WALKER, JR.
606 E Street, Suite 203, Anchorage Alaska 99501
(907) 279-2889 email: hemanir@ak.net

EDUCATION

- University of Wyoming Laramie, Wyoming. May 1992
J.D. Degree
- Arizona State University Tempe, Arizona. May 1988
B.S. Political Science Degree

LAW EXPERIENCE

- Lynda Limon Law Offices Anchorage AK 2000 to Present
Attorney
- Koval & Featherly Law Offices Anchorage AK 1998 to 2000
Attorney
- Public Defender Agency Anchorage AK 1995 to 1996
Attorney
- Rex Lamont Butler & Associates Anchorage AK 1993 to 1995
Associate Attorney
- Law Office of Rex Lamont Butler Anchorage AK 1993 to 1993
Law Clerk
- Office of Public Advocacy Anchorage AK 1992 to 1993
Legal Intern
- Defender Association of Philadelphia PA 1991
Legal Intern
- Maricopa County Superior Court Phoenix AZ 1989
Pre-Trial Services Officer

BUSINESS OWNERSHIP

- The Body Shop, 5th Avenue Mall Anchorage AK November 1996

MEMBERSHIPS AND AFFILIATIONS

Alaska Bar Association, United States District Court of Alaska, Anchorage Bar Association, American Bar Association, National Association of Criminal Defense Lawyers, Young Lawyer Section Board, Alaska Academy of Trial Lawyers

FAX: 269-0152 Mail: P.O. Box 101468, Anch. AK 99510
Pouch: Anchorage

Disclosure of Participation in
State Contracts, Leases and Grants over \$5000
which meet criteria in AS 24.60.040

NAME OF DISCLOSER: Herman G. Walker, JR
Please Print

NAME OF FAMILY MEMBER (If disclosing participation of a family member):
N/A

Relationship between family member and discloser: _____

ADDRESS: 606 E Street, Suite 203, Anchorage, 99501
PHONE NUMBER (Daytime) (907) 279-2889

EMPLOYER (if legislative employee) _____

Disclose information requested below,
as required under AS 24.60.040

Description of State Contract, Lease or Grant: CONTRACT FOR LEGAL SERVICES TO REPRESENT DEFENDENTS IN CRIMINAL CASES

State Agency Awarding Contract, Lease or Grant: Office of Public Advocacy

Under what method(s) was contract, lease or grant issued? (i.e. request for proposals, single source, competitive sealed bid, etc) RFP

Annual Amount/Value of Contract, Lease, Grant: 208,000
Additional clarifying information: Paid By Case At An Hourly Rate

The above is true and accurate, in accordance with AS 24.60.040.

[Signature]
Signature

1-18-06
Date

NOTE: Renegotiation of contract, lease, grant must be disclosed, if original contract, lease, grant was disclosed or, if as a result of renegotiation, the contract, lease, grant falls under the disclosure requirements.

Reporting Deadlines:

Within 30 days of signing contract, lease or, grant agreement or renegotiation agreement. If during the last 30 days of session or during the interim between regular sessions, by March 15 of the following year.

Select Committee on
Legislative Ethics

Rec'd 1-18-05

By JOINT

Via fax

ALASKA PUBLIC OFFICES COMMISSION
2221 E. NORTHERN LIGHTS, #128
ANCHORAGE, AK 99508-4149
907/276-4176 - FAX: 276-7018

2006 LEGISLATIVE FINANCIAL DISCLOSURE STATEMENT
(AS 24.60.200 - 24.60.260)

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- ◆ The LFD Manual contains useful information about how to complete this report.
- ◆ If you have any questions or need help completing the form, refer to the instruction manual.
- ◆ If you still need help, call APOC at 907/276-4176.

SIGN THIS REPORT ON THE LAST PAGE. THIS REPORT IS DUE March 15, 2006.

Members of the Select Committee on Legislative Ethics file on January 9, 2006.

BACKGROUND INFORMATION

NAME: HERMAN G. WALKER, JR. (907) 279-2889 (907) 258-4428
Phone Number Fax Number

OCCUPATION: ATTORNEY, BUSINESS OWNER

MAILING ADDRESS: 606 E STREET, SUITE 203
(Street Address or Post Office Box) E-Mail Address

ANCHORAGE, ALASKA 99501
(City/Town and Zip Code)

Day Phone Number (907) 279-2889 Day Fax Number (907) 258-4428

OFFICE HELD (Check One): Legislator Legislative Director

Public member of the Select Committee on Legislative Ethics

TITLE: _____

FAMILY MEMBER INFORMATION (list names):

SPOUSE OR DOMESTIC PARTNER: LYNDA A. LIMON

DEPENDENT CHILDREN: DUPREE LIMON WALKER, LUCERO LIMON WALKER

NONDEPENDENT CHILDREN: N/A

SCHEDULE A
SOURCES OF INCOME OVER \$5000

Salaried Employment

If NONE reportable, check box

Report the name and address of each employer who paid you, your spouse or domestic partner, dependent children or nondependent children living with you more than \$5000 during calendar year 2005.

List your employment as a legislator or legislative director, and each source of salaried income over \$5000 for you, your spouse, domestic partner, dependent children and nondependent children living with you. You are not required to disclose the amount of salary received by your family members or the salary you received from your state employment.

Provide enough detail when describing the nature of services to tell a reader what work was performed for the salary received.

Report the amount of income you received when your employer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.
See pages 6-8 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: HERMAN G. WALKER, JR
 Employer's Name: LYNDA A. LIMON, LAW OFFICE
 Employer's Address: 606 E STREET, SUITE 203, ANCHORAGE, ALASKA 99501
 Nature of Services Provided: Legal
 Amount: \$60,000.00

Name of filer, spouse, domestic partner, or child: LYNDA A. LIMON
 Employer's Name: Self Employed
 Employer's Address: SAME AS ABOVE
 Nature of Services Provided: Legal
 Amount: \$ Have Not Filed 2005 Taxes

Name of filer, spouse, domestic partner, or child: _____
 Employer's Name: _____
 Employer's Address: _____
 Nature of Services Provided: _____
 Amount: \$ _____

SCHEDULE A SOURCES OF INCOME OVER \$5000

Self-Employment

If NONE reportable, check box

Self-employment results when the person whose income is being reported worked in any of the following: a corporation in which you, your spouse, domestic partner, dependent children, nondependent children living with you or a combination of them held a controlling interest, or a sole proprietorship, limited liability company, partnership, or professional corporation in which the person whose income is being reported has an ownership interest.

List the name, address, and nature of services provided for each self-employment source of income from whom more than \$5000 was received as compensation for personal services by you or a family member. Provide enough detail when describing the nature of services to tell a reader what work was performed for the compensation received.

If the business is non-retail, list the nature of services performed and the name and address of each client or customer who paid the business over \$5000 during calendar year 2005.

Report the amount of income you received from a client, patient or customer when the client, patient, or customer:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.

See pages 8-10 of the LFD manual for more help with this section.

Name of filer, spouse, domestic partner, or child: LYNDA A. LIMON

Business Name: THE BODY SHOP; LAW OFFICE OF LYNDA A. LIMON

Retail Non-Retail (If you check non-retail, list clients/customers, and amounts if required, below.)

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: BATH AND BODY PRODUCTS

Amount: \$ HAVE NOT FILED 2005 TAXES

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

Name of client/customer: _____

Client/Customer Address: _____

Nature of Services Provided: _____

Amount: \$ _____

SCHEDULE A SOURCES OF INCOME OVER \$5000

Dividends and Interest

If NONE reportable, check box

Report the name of the source of all dividends, interest and capital gains over \$5000 earned during calendar year 2005, (excluding retirement accounts) such as S.B. Money Market Acct or CD's in ABC Bank.

- List the name(s) of the asset(s) (not in a retirement account) which paid you, your spouse, domestic partner, child or nondependent child living with you, dividends, interest or capital gains of more than \$5000 such as IBM stock or Cordova Municipal Bonds.
- (Report the assets of a retirement account or trust on page 8)

See page 13 of the LFD manual for more help with this section.

Recipient (filer, spouse, domestic partner, or child)

Name of Source of Income

Rental Income

If NONE reportable, check box

List the first and last name of each tenant from whom over \$5000 was received during calendar year 2005. If property is located outside Alaska and managed by a person other than you, your spouse, domestic partner, dependent child or nondependent child living with you, you may list the managing agent instead of listing each tenant.

See page 14 of the LFD manual for more help with this section.

Owner (filer, spouse, domestic partner, or child)

Tenant(s)

Lynda A. Limon

Tellus Realty

Other Income

If NONE reportable, check box

List each source of income over \$5000 not listed elsewhere on this statement, including income from the sale of real property; social security; retirement; the assets of an IRA cash-out; the name of the person who paid alimony or child support; government entitlements; honoraria and shared living expenses.

See page 14 of the LFD manual for more help.

Recipient (filer, spouse, domestic partner, or child)

Name of Source

HERMAN G. WALKER JR.

LYNDA A. LIMON

DUFREE L. WALKER

LUCERO L. WALKER

PERMANENT FUND DIVIDEND

PERMANENT FUND DIVIDEND

PERMANENT FUND DIVIDEND

PERMANENT FUND DIVIDEND

SCHEDULE B BUSINESS INTERESTS

Business Interests

If NONE reportable, check box

Report all business relationships even if they were not sources of income to you, your spouse, domestic partner, dependent child or nondependent child living with you during calendar year 2005.

- List ownership interests of more than \$5000 as a shareholder in publicly traded stocks, regardless of income, that are not listed elsewhere on this Statement. (A list of the names of publicly traded stocks such as IBM or Microsoft may be listed by name only on a separate page.)
- List interests in limited liability companies or as a sole proprietor, shareholder, owner, partner, officer, or director including native corporations.
- List involvements in profit and non-profit organizations as an officer or director.

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

See page 16 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: HERMAN G. WALKER, JR.
 Business Name: WYLD GROUP LLC; DBA THE BODY SHOP
 Business Address: 606 E STREET, SUITE 203, ANCHORAGE, 99501-ADMINISTRATIVE OFFICE
 Nature of Interest: LIC MEMBER
 Description of Business's Activity: SELL BATH & BODY PRODUCTS, AROMA THERAPY & COSMETICS

Name of filer, spouse, domestic partner, or child: LYNDA A. LIMON
 Business Name: WYLD GROUP LLC; DBA THE BODY SHOP
 Business Address: 606 E STREET, SUITE 203, ANCHORAGE, 99501-ADMIN. OFFICE
 Nature of Interest: LIC MEMBER
 Description of Business's Activity: SELL BATH & BODY PRODUCTS, AROMA THERAPY & COSMETICS

Name of filer, spouse, domestic partner, or child: _____
 Business Name: _____
 Business Address: _____
 Nature of Interest: _____
 Description of Business's Activity: _____

Name of filer, spouse, domestic partner, or child: _____
 Business Name: _____
 Business Address: _____
 Nature of Interest: _____
 Description of Business's Activity: _____

Name of filer, spouse, domestic partner, or child: _____
 Business Name: _____
 Business Address: _____
 Nature of Interest: _____
 Description of Business's Activity: _____

SCHEDULE B REAL PROPERTY INTERESTS

Real Property Interests

If NONE reportable, check box

Report all real property interests, such as your home, neighboring lots, rent to own home, rental property, vacant property, recreational property, business property or limited partnerships including real estate held through a trust or sold during calendar year 2005.

Include a street address, city and state or a complete legal description for each piece of property listed.

Use copies of this page if you need additional space to complete this section.

See page 17 of the LFD manual for more help.

Name of filer, spouse, domestic partner, or child: HERMAN G. WALKER, JR.
 Street Address or Legal Description: 9214 STATHMORE DRIVE
 City or Borough and State: ANCHORAGE, ALASKA 99515
 Nature of Interest: OWNER PERSONAL HOME
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: LYNDA A. LIMON
 Street Address or Legal Description: 2440 E 5TH PLACE
 City or Borough and State: TEMPE, ARIZONA 85281
 Nature of Interest: OWNER RENTAL
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
 Street Address or Legal Description: _____
 City or Borough and State: _____
 Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
 Street Address or Legal Description: _____
 City or Borough and State: _____
 Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

Name of filer, spouse, domestic partner, or child: _____
 Street Address or Legal Description: _____
 City or Borough and State: _____
 Nature of Interest: _____
(Option to Buy, Ownership, Leasehold) Current Use

SCHEDULE C LOANS, LOAN GUARANTEES, AND DEBTS Of More Than \$5000

Loans, Loan Guarantees, and Debts

If NONE reportable, check box

Report the name of each creditor or lender to whom more than \$5000 was owed during any part of the prior calendar year by you, your spouse, domestic partner, dependent children or nondependent children living with you.

List financial obligations including mortgages on property sold during calendar year 2005; loans that have been guaranteed, delinquent taxes, alimony, child support payments; medical bills; mortgage, boat and auto loans; business and personal loans; escrow's; student loans; signature loans; and promissory notes. Loans include secured, unsecured and contingent loans. Do not report credit card obligations or revolving charge accounts.

Circle whether the entity is a lender, creditor or guarantor.

See page 18 of the LFD manual for more information about the reporting requirements.

HERMAN G. WALKER, JR + LYNDA A. LIMON OWE IRS
HERMAN G. WALKER, JR
Name of Debtor (filer, spouse, domestic partner or child)

NORTHEIM BANK
Name of Lender/Creditor/Guarantor

Herman G Walker, Jr
Name of Debtor (filer, spouse, domestic partner or child)

Wells Fargo Mortgage, Inc.
Name of Lender/Creditor/Guarantor

HERMAN G. WALKER, JR
Name of Debtor (filer, spouse, domestic partner or child)

Wyoming Student Loan
Name of Lender/Creditor/Guarantor

LYNDA A. LIMON
Name of Debtor (filer, spouse, domestic partner or child)

NORTHEIM BANK-CREDIT UNION ONE
Name of Lender/Creditor/Guarantor

LOANS, and LOAN GUARANTEES, Of More Than \$1000

Report the address of the creditor or lender, the original amount of the obligation, current balance owed, interest rate, length of the loan, and whether a written loan agreement exists for a creditor or lender who:

- Hired a lobbyist or was a lobbyist;
- Had or sought contracts with the legislature or agency of the state that exceeded \$10,000;
- Was a municipality or local government entity; or
- Was affected financially by an action of the legislature or any other state agency in an amount exceeding \$5,000 including actions concerning professional or occupational licenses, natural resource permits or quotas, rates of assessment or taxation, health, safety or environmental standards and insurance or business practices.

Use copies of this page if you need additional space to complete this section.

See page 18 of the LFD manual for more information about the reporting requirements.

Source of a loan or loan guarantee that had a substantial interest in legislative, administrative or political actions.

Name of Debtor (filer, spouse, domestic partner, or child)

Name of Lender/Creditor

\$ _____
Original Amount Owed

\$ _____
Balance Owed

Address of Lender/Creditor

_____ %
Interest Rate

_____ Years
Length of Loan

Does written loan agreement exist? YES NO

SCHEDULE C
BENEFICIAL INTEREST IN RETIREMENT ACCOUNTS/TRUSTS
Exceeding \$5000

Retirement Accounts Trusts

If NONE reportable, check box

Report each beneficial interest in a retirement account or trust during calendar year 2005 for you, your spouse, domestic partner, dependent children or nondependent children living with the filer. Trusts include employee benefit accounts (pension and profit-sharing accounts), retirement accounts (IRA, 401K, SEP, Keogh) and family trust funds. Assets of a trust/retirement account include stocks, bonds, mutual funds, cash accounts, CD's, real property, and interests in limited partnerships.

- Name the trustor (the person who provided the funds or assets for the trust).
- List the assets by name such as IBM stock or Templeton Growth Fund

See page 20 of the LFD manual for more help.

HERMAN G. WALKER, JR 90%
Name of filer, spouse, domestic partner or child: Extent of Interest (Percent)

HERMAN G. WALKER, Sr. TRUSTOR IS LIVING
Name of the person, employer or entity who provided the funds or assets (Trustor)

VARIOUS PROPERTIES AROUND THE COUNTRY. NO PROPERTIES IN ALASKA
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

LYNDA A. LIMON 100%
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

NORTH WESTERN PRUDENTIAL
Name of the person, employer or entity who provided the funds or assets (Trustor)

Simple, SEP, IRA
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

HERMAN G. WALKER JR 100%
Name of filer, spouse, domestic partner, or child: Extent of Interest (Percent)

STATE OF ALASKA
Name of the person, employer or entity who provided the funds or assets (Trustor)

PERS
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

HERMAN G. WALKER, JR. 100%
Name of filer, spouse or domestic partner, or child: Extent of Interest (Percent)

NORTH WESTERN PRUDENTIAL
Name of the person, employer or entity who provided the funds or assets (Trustor)

Simple, IRA
Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

Name of filer, spouse or domestic partner, or child: Extent of Interest (Percent)

Name of the person, employer or entity who provided the funds or assets (Trustor)

Name(s) of the stocks, bonds, mutual funds or other assets contained in the retirement account or trust

SCHEDULE C GOVERNMENT CONTRACTS AND LEASES CERTIFICATION

Contracts and Offers to Contract

If NONE reportable, check box

List all contracts and offers to contract with the state or instrumentality of the state during calendar year 2005 held, bid or offered. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member; or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 21 of the LFD manual for more help.

Herman G. Walker, Jr.
Name(s) of Contractor

Dept. of Administration - Office of Public Advocacy
Contracting Agency/Department

208,000⁰⁰
Indicate: Bid, held or offer made

2006-0200-5577
Contract number and description

Natural Resource Leases

If NONE reportable, check box

List all natural resource leases, including mineral, timber, or oil leases bid held or offered during calendar year 2005. Report this information for yourself, your spouse, domestic partner, dependent child or nondependent child living with the filer who was a sole proprietor, a partnership or professional corporation of which you are a member; or a corporation in which you or your family members listed above (or a combination of them) held a controlling interest.
See page 22 of the LFD manual for more help.

Leascholder

Nature of Lease

Indicate: Bid, held or offer made

Identity of Lease and Description

CERTIFICATION

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

[Signature]
SIGNATURE

1-18-06
DATE

Herman Walker, Jr.
Printed Name of Filer

Anchorage, Alaska
Place

File this Statement with the

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

OR

ALASKA PUBLIC OFFICES COMMISSION
PO Box 110222
Juneau, AK 99811-0222
240 Main, Rm. 201
Telephone 907/465-4864
FAX 907/465-4832

CLIENTS FOR 2005

Andrews, Gerald
4911 W. 84th
Anchorage, Alaska 99502

Ashley, Krystal
1931 E. 75th Avenue, #3
Anchorage, Alaska 99507

Brod, Debra
11201 Latta Circle
Anchorage, Alaska 99516

Stuart Bunnell
P.O. Box 11352
Anchorage, Alaska 99511-1352

John Carman
1700 Scenic Way
Anchorage, Alaska 99501

Karen Gibson
2103 Chirchill Drive
Anchorage, Alaska 99517

Robert Green
3349 Leonard Circle
Anchorage, Alaska 99507

Julie M. Hasquet-Woolston
14500 Prator Street
Anchorage, Alaska 99516

Hefley, Trula C. "Sunny"
2920 Lexington Circle
Anchorage, Alaska 99502

(Continued)

Michele Hurst
2512 Curlew Circle
Anchorage, Alaska 99502

Pam Imig
4311 Seeley Court
Anchorage, Alaska 99502

Daphne Koropp
2600 Denali, Suite 101
Anchorage, Alaska 99503

Gary R. LaRose Jr.
P.O. Box 172
Girdwood, Alaska 99587

Michael C. Lindbeck
2813 Smug Harbor Circle
Anchorage, Alaska 99507

Janese M. Steige-Maile
5401 Cordova, Suite 204
Anchorage, Alaska 99518

Kent Mitchell
1340 King Avenue, #108
Columbus, Ohio 43212

Brian A. Ryan
CO Steve and Sue Ryan
P.O. Box 652

Gregory L. Scott
12550 Tanada Loop
Anchorage, Alaska 99515

Bradley S. Smith
General Deliver
Osburn, Idaho 83849

Kelcey Steinriede
630 Jane Street
Cleveland, MS 38732

Goetz A. Tessmer
1507 W. 34th Avenue
Anchorage, Alaska 99503

Jane E. Tranel
14531 Woodhaven Circle
Anchorage, Alaska 99516

Walter J. Weaver, Jr.
P.O. Box 202383
Anchorage, Alaska 99520

Mary N.D. Williams
P.O. Box 774396
Eagle River, Alaska 99577

Mary P. Wright
1557 Open Pond Road
Whigham, Georgia 39897

Nancy DuVall
7101 E. Upper Mesa Drive
HCI Box 6174
Palmer, Alaska 99645

Geisler, Jason (App)
Office of Public Advocacy
900 W. 5th Avenue, Suite 525
Anchorage, Alaska 99501

Forrest Johnson, (App)
Office of Public Advocacy
900 W. 5th Avenue, Suite 525
Anchorage, Alaska 99501

Kvamme, Albert App)
Office of Public Advocacy
900 W. 5th Avenue, Suite 525
Anchorage, Alaska 99501

McGhee, Lamar (App)
900 W. 5th Avenue, Suite 525
Anchorage, Alaska 99501

Richard Redmond
Box 8700
Indian, Alaska 99540

CONFIRM.

VIOLENT

CRIMES

BOARD,

LEROY

BARKER,

1/31/06

ALASKA STATE SENATE



Session:
State Capitol
Juneau, Alaska 99801-1182
(907) 465-2327
(907) 465-5241 Fax

Interim:
119 N. Cushman, Suite 201
Fairbanks, Alaska 99701
(907) 456-8161
Senator_Ralph_Seekins@legis.state.ak.us

SENATE JUDICIARY COMMITTEE

Senator Ralph Seekins, Chairman

REPORT ON RECOMMENDATION OF APPOINTMENT

May 5, 2005

The Honorable Ben Stevens
President of the Senate
State Capitol
Juneau, Alaska 99801-1182

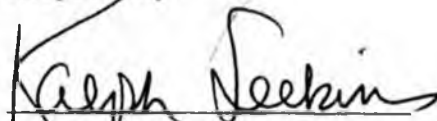
Dear President Stevens:

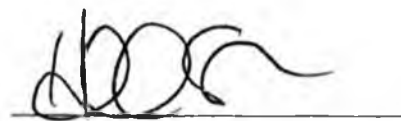
In accordance with AS 39.05.080, the Senate Judiciary Committee reviewed the following and recommends the appointment be forwarded to the Senate floor or to a joint session (whichever applies) for consideration:


Violent Crimes Compensation Board: LeRoy J. Barker

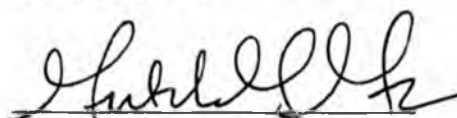
This does not reflect an intent by any of the members to vote for or against the individual during any further session(s).

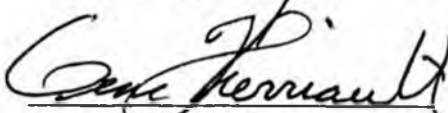
Respectfully,


Senator Seekins, Chair


Senator French


Senator Huggins


Senator Guess


Senator Therriault

ALASKA STATE SENATE



Session:
State Capitol
Juneau, Alaska 99801-1182
(907) 465-2327
(907) 465-5241 Fax

Interim:
119 N. Cushman, Suite 201
Fairbanks, Alaska 99701
(907) 456-8161
Senator_Ralph_Seekins@legis.state.ak.us

SENATE JUDICIARY COMMITTEE

Senator Ralph Seekins, Chairman

REPORT ON RECOMMENDATION OF APPOINTMENT

May 5, 2005

The Honorable Ben Stevens
President of the Senate
State Capitol
Juneau, Alaska 99801-1182

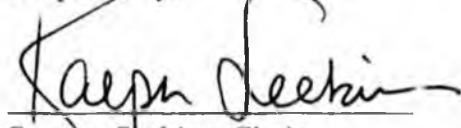
Dear President Stevens:

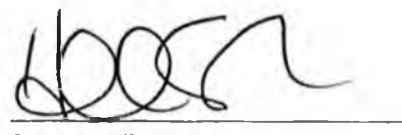
In accordance with AS 39.05.080, the Senate Judiciary Committee reviewed the following and recommends the appointment be forwarded to the Senate floor or to a joint session (whichever applies) for consideration:

Alaska Judicial Council: Christina (Tena) Williams

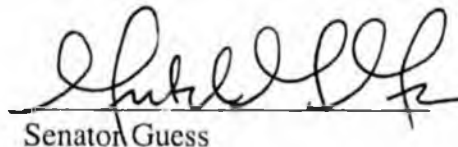
This does not reflect an intent by any of the members to vote for or against the individual during any further session(s).

Respectfully,


Senator Seekins, Chair


Senator French


Senator Huggins


Senator Guess


Senator Therriault

ALASKA STATE SENATE



Session:
State Capitol
Juneau, Alaska 99801-1182
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SENATE JUDICIARY COMMITTEE

Senator Ralph Seekins, Chairman

REPORT ON RECOMMENDATION OF APPOINTMENT

May 5, 2005

The Honorable Ben Stevens
President of the Senate
State Capitol
Juneau, Alaska 99801-1182

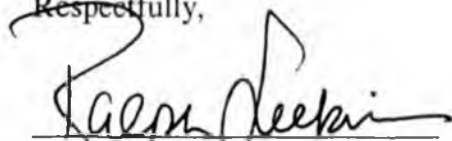
Dear President Stevens:

In accordance with AS 39.05.080, the Senate Judiciary Committee reviewed the following and recommends the appointment be forwarded to the Senate floor or to a joint session (whichever applies) for consideration:


Commission on Judicial Conduct: Ethel Staton

This does not reflect an intent by any of the members to vote for or against the individual during any further session(s).

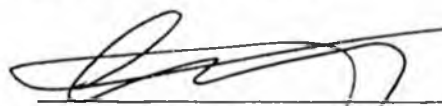
Respectfully,



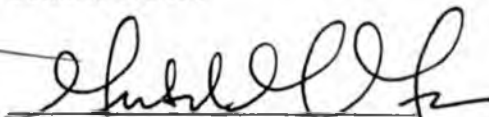
Senator Seekins, Chair



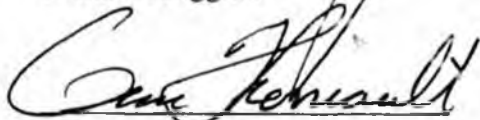
Senator French



Senator Huggins



Senator Guess



Senator Therriault

ALASKA STATE SENATE



Session:
State Capitol
Juneau, Alaska 99801-1182
(907) 465-2327
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119 N. Cushman, Suite 201
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Senator_Ralph_Seekins@legis.state.ak.us

SENATE JUDICIARY COMMITTEE

Senator Ralph Seekins, Chairman

REPORT ON RECOMMENDATION OF APPOINTMENT

May 5, 2005

The Honorable Ben Stevens
President of the Senate
State Capitol
Juneau, Alaska 99801-1182

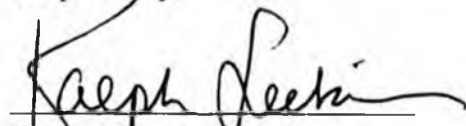
Dear President Stevens:

In accordance with AS 39.05.080, the Senate Judiciary Committee reviewed the following and recommends the appointment be forwarded to the Senate floor or to a joint session (whichever applies) for consideration:

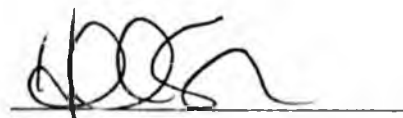
Commission on Judicial Conduct: Jerry Story

This does not reflect an intent by any of the members to vote for or against the individual during any further session(s).

Respectfully,



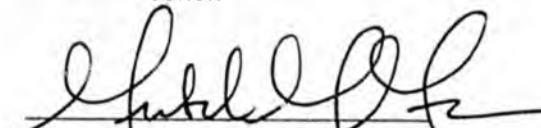
Senator Seekins, Chair



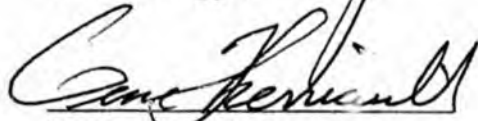
Senator French



Senator Huggins



Senator Guess



Senator Therriault



Official Business

Alaska State Legislature

Senate

Office of the Secretary

State Capitol, Room 213
Juneau, Alaska 99801-1182
Phone: (907) 465-3701
Fax: (907) 465-2832
Email: senate_secretary@legis.state.ak.us

April 18, 2005

MEMORANDUM

TO: Senator Seekins, Chair
Judiciary Committee

FROM: Kirsten Waid *KW*
Secretary of the Senate

SUBJECT: Governor's Confirmations

Pursuant to AS 39.05.080, President Stevens has referred the following names for legislative confirmation to your committee for a hearing, recommendation and report:

Commission on Judicial Conduct

Ethel Staton - Sitka

Appointed: 3/4/1997 Reappointed: 3/23/2005

Term Expires: 3/1/2009

Jerry Story - Wasilla

Appointed: 3/23/2005 Term Expires: 3/1/2008

Alaska Judicial Council

Christena (Tena) Williams - Ketchikan

Appointed: 4/13/2005 Term Expires: 3/1/2011

Violent Crimes Compensation Board

LeRoy J. Barker - Anchorage

Appointed: 2/19/2003 Reappointed: 3/23/2005

Term Expires: 3/1/2008

KCW:jcs
Resumes attached

STATE OF ALASKA
Boards and Commissions

JUDICIAL CONDUCT

Handwritten signature/initials

BOARD: Commission on Judicial Conduct

BOARD IDENTIFICATION NUMBER: 052

DEPARTMENT: Judicial Branch

AUTHORITY: AS 22.30.010

STATUS: Active

SUNSET DATE:

REQUIREMENTS: Legislative Confirmation and Financial Disclosure

PROHIBITIONS: Members may not serve on the Judicial Council and the Commission on Judicial Conduct simultaneously.

TERM: 4 years

DESCRIPTION: 9 members: 6 appointed by Governor - 3 public members who are not judges, retired judges, or members of the state Bar; 3 attorneys who have practiced law in Alaska for 10 years, from nominations provided by Bar Association. The 3 justices/judges are elected by the justices/judges of the state courts. Membership terminates if member ceases to hold position that qualified appointment

FUNCTION: Reviews allegations against judges/justices and promotes compliance with codes of conduct for judges

CHAIR: Commission selects

SPECIAL FACTS: Quorum - majority (but must include 1 public member, 1 member of the Alaska Bar, and 1 judge member); Court presents annual budget to Legislature. Commission elects chairman.

COMPENSATION: Standard Travel and Per Diem

MEETINGS: At least quarterly; 1-3 days each depending on caseload

FOR FURTHER INFORMATION CONTACT:

Ms. Marla Greenstein
Executive Director
1029 West Third Avenue, Suite 550
Anchorage, AK 99501
Phone: (907) 272-1033, FAX: (907) 272-9309
E-MAIL ADDRESS: m.greenstein@ajc.state.ak.us
WEBSITE: www.ajc.state.ak.us/CONDUCT.htm

STATE OF ALASKA - OFFICE OF THE GOVERNOR

Boards and Commissions Office

Membership Roster

JUDICIAL CONDUCT (052)

Member	Date Appointed	Reappointed	Term Expires
Peter J. Aschenbrenner Attorney/Governor's Appointment Attorney Aschenbrenner Law Offices 1830 Second Avenue Fairbanks, AK 99707 alo@alolaw.com Home Phone - (907) 479-5895 Work Phone - (907) 456-3910 FAX - (907) 456-8064	3/24/2004		3/1/2008
Richard Burton Public/Governor's Appointment 443 Forest Park Drive Ketchikan, AK 99901 rburton@kpunet.net Work Phone - (907) 247-3334 FAX - (907) 247-3335	4/10/2003		3/1/2007
Patricia A. Collins, Esq. Judge/Court Appointment P.O. Box 114100 Juneau, AK 99811-4100 Work Phone - (907) 463-4740 FAX - (907) 463-5016	2/4/2003		2/1/2007
Ben Esch, Esq. Judge/Court Appointment Superior Court Judge Second Judicial District, Nome P.O. Box 1100 Nome, AK 99762-1100 Work Phone - (907) 443-5216 FAX - (907) 443-2192	2/4/2003	2/1/2004	2/1/2008
Jeffrey M. Feldman, Esq Attorney/Governor's Appointment Feldman & Orlansky 500 L Street, Suite 400 Anchorage, AK 99501 Home Phone - (907) 272-8084 Work Phone - (907) 272-3538	9/1/1993	6/7/2001	3/1/2005

STATE OF ALASKA - OFFICE OF THE GOVERNOR

Boards and Commissions Office

Membership Roster

JUDICIAL CONDUCT (052)

Member			
Seat Designation			
Address	Date Appointed	Reappointed	Term Expires
Thomas G. Nave Attorney/Governor's Appointment Attorney Thomas G. Nave Attorney at Law 227 Seventh Street Juneau, AK 99801 nave@ptialaska.net Home Phone - (907) 789-1436 Work Phone - (907) 586-3309 FAX - (907) 586-2206	3/24/2004		3/1/2008
Nancy J. Nolan Judge/Court Appointment 825 W. 4th, Suite # 320 Anchorage, AK 99501 nnolan@courts.state.ak.us Work Phone - (907) 264-0643 FAX - (907) 264-0503	2/4/2003		2/1/2007
Ethel L. Staton Public/Governor's Appointment (resides in Sitka) c/o AK Comm on Judicial Conduct 310 K Street, Suite 301 Anchorage, AK 99501 Home Phone - (907) 747-8136 Work Phone - (907) 747-3435 FAX - (907) 747-7886	3/4/1997	3/23/2005	3/1/2009
Jerry Story Public/Governor's Appointment 925 N Church Street P. O. Box 874708 Wasilla, AK 99687-4708 Home Phone - (907) 373-5302	3/23/2005		3/1/2008

STATE OF ALASKA - OFFICE OF THE GOVERNOR

Boards and Commissions Office

Membership Roster

JUDICIAL CONDUCT (052)

Member	Date Appointed	Reappointed	Term Expires
Peter J. Aschenbrenner Attorney/Governor's Appointment Attorney Aschenbrenner Law Offices 1830 Second Avenue Fairbanks, AK 99707	3/24/2004		3/1/2008
Richard Burton Public/Governor's Appointment 443 Forest Park Drive Ketchikan, AK 99901	4/10/2003		3/1/2007
Patricia A. Collins, Esq. Judge/Court Appointment P O Box 114100 Juneau, AK 99811-4100	2/4/2003		2/1/2007
Ben Esch, Esq. Judge/Court Appointment Superior Court Judge Second Judicial District, Nome P O Box 1100 Nome, AK 99762-1100	2/4/2003	2/1/2004	2/1/2008
Jeffrey M. Feldman, Esq. Attorney/Governor's Appointment Feldman & Orlansky 500 L Street, Suite 400 Anchorage, AK 99501	9/1/1993	6/7/2001	3/1/2005
Thomas G. Nave Attorney/Governor's Appointment Attorney Thomas G. Nave Attorney at Law 227 Seventh Street Juneau, AK 99801	3/24/2004		3/1/2008
Nancy J. Nolan Judge/Court Appointment 825 W 4th, Suite # 320 Anchorage, AK 99501	2/4/2003		2/1/2007

STATE OF ALASKA - OFFICE OF THE GOVERNOR

Boards and Commission Office

Membership Roster

JUDICIAL CONDUCT (052)

Member Seat Designation Address	Date Appointed	Reappointed	Term Expires
Ethel L. Staton Public/Governor's Appointment (resides in Sitka) c/o AK Comm on Judicial Conduct 310 K Street, Suite 301 Anchorage, AK 99501	3/4/1997	3/23/2005	3/1/2009
Jerry Story Public/Governor's Appointment 925 N Church Street P. O. Box 874708 Wasilla, AK 99687-4708	3/23/2005		3/1/2008

JUDICIAL CONDUCT/
Resume

ETHEL L. STATON
P.O. BOX 829
SITKA, ALASKA 99838

PHONE (907) 747-8138 HOME
(907) 747-3439 WORK

FA (907) 747-7885
JANUARY 24, 2001

ETHEL L. STATON AN ALASKAN NATIVE, BORN AND RAISED IN KETCHIKAN, ONE OF FIVE DAUGHTERS OF MABEL MATHER MILONICH AND ROBERT MILONICH. MY MOTHER WAS TSIMSHIAN AND MY FATHER YUGOSLAVIAN. I GRADUATED FROM KETCHIKAN HIGH SCHOOL IN 1943. I MARRIED NORMAN E. STATON IN 1944 AND HAD TWO CHILDREN, CANDACE BARGER, A REALTOR, AND NORMAN STATON JR, A CONSULTANT, FIVE GRANDCHILDREN AND ONE GREAT GRAND-DAUGHTER. MY HUSBAND OF FIFTY-ONE YEARS DIED IN 1995.

WE MOVED TO SITKA IN 1955 TO OPEN A RESTAURANT AND TO MAKE SITKA OUR HOME. THROUGH THE YEARS WE OWNED AND OPERATED SEVERAL RESTAURANTS, COCKTAIL LOUNGE, MOTEL, RENTALS, A GIFT AND JEWELRY STORE. THE STORE IS IN THE OLDEST BUILDING ON THE WEST COAST STILL STANDING BUILT BY THE RUSSIANS IN 1835.

I WAS ON THE INTERIM BOARD OF THE SITKA NATIVE ASSOCIATION CREATED BY THE ALASKA NATIVE CLAIMS SETTLEMENT ACT IN 1971, THAT LED TO THE INCORPORATION OF SHEE ATIKA, INC., IN 1974. I HAVE BEEN ON THE BOARD FOR TWENTY-SEVEN YEARS, HAVING SERVED AS CHAIRMAN AND CURRENTLY THE CORPORATE SECRETARY. SHEE ATIKA HAS GROWN FROM IT'S INCEPTION TO BECOME A SUCCESSFUL NATIVE CORPORATION.

I SERVE ON THE BOARD OF TRUSTEES FOR SHELDON JACKSON COLLEGE AND THE SITKA COMMUNITY ADVISORY BOARD FOR HOLLAND AMERICA LINE, WEST-OURS, INC.

SERVED SIX YEARS ON THE BOARD OF GOVERNORS FOR THE ALASKA BAR ASSOCIATION, PAST PRESIDENT OF THE VETERAN OF FOREIGN WARS IN KETCHIKAN, PAST PRESIDENT OF SITKA EMBLEM CLUB, PAST PRESIDENT OF BETA SIGMA PHI., AND A MEMBER OF ST. PETERS EPISCOPAL CHURCH. MY GRANDFATHER WAS THE FIRST NATIVE EPISCOPAL PRIEST ORDAINED IN ALASKA.

JERRY STORY

RESUME

PROFESSIONAL ADMINISTRATOR

MISSION STATEMENT

I CAN MAKE A DIFFERENCE**ADDRESS:**

~~1936 East 7th Ave.~~
~~Anchorage, Alaska 99501~~
~~Phone: (907) 272-9900~~

P.O. Box 874208
 WASILLA, AK
 99687

EDUCATION:

School Year
 1981-82

Middle Tennessee State University
 Murfreesboro, Tennessee
 Specialist in Education-Administration
 and Supervision (Superintendent)

School Year
 1973:

University of South Dakota
 Vermillion, South Dakota
 Master's Degree-School Administration

School Year
 1966:

University of Northern Colorado
 Greeley, Colorado
 Bachelor of Arts -Elementary Education-

EMPLOYMENT HISTORY:*Current*

December 1990
 to March 1991

Retired

Acting Administrator-North Slope Borough School District-
 Anaktuvuk Pass-Contracted to administer Nunamiut School
 for 90 days after the principal left for health reasons.

July 1989

Early retirement from State of Alaska Teachers System

July 1988 to
 July 1989

North Slope Borough
 Assistant Principal
 Point Hope, Alaska 99766

July 1976 to
 July 1988

Assistant Superintendent
 Delta/Greely School District
 Delta Junction, Alaska 99737

I was responsible for numerous state and federal programs,
 administrative control over all facilities and construction
 projects, School Board's negotiation team, district-wide needs
 assessment, Master Plan development, technical assistance

energy audit and personnel resource management.

I conjointly planned, organized, implemented and evaluated the aforementioned educational programs during which period fiscal program support increased approximately 125% and personnel support increased approximately 144%.

August 1974 to
June 1976

Principal
Delta Junction High School
Delta/Greely School District
Delta Junction, Alaska 99737

Responsible for planning, organizing and directing the human and material resources of the school so that the teacher-learning process enabled and enhanced the extent that the needs and purposes of students, faculty and society were met.

August 1973 to
June 1974

Principal
Stapleton Public Schools
Stapleton, Nebraska

July 1971 to
June 1973

Principal
Hartington Public Schools
Hartington, Nebraska

August 1969 to
June 1971

Teacher
Hartington Public Schools
Hartington, Nebraska

September 1968 to
May 1969

Teacher
State-Operated School System
Glennallen, Alaska

September 1967 to
May 1968

Teacher
Fort Dodge Public Schools
Fort Dodge, Iowa

September 1965 to
May 1967

State-Operated School System
Delta Junction, Alaska

12 Years-Assistant Superintendent
5 Years- Principal
1 Year- Assistant Principal
6 Years-teacher

Professional Associations:

President-Alaska State-Operated School Administrators
Alaska Association of School Administrators
American Association of School Administrators
Member-Northwest Accreditation of Schools and Colleges-
- Review Team

3-B

REFERENCES:

Bob Harty, Assistant Superintendent
North Slope Borough School District
P.O. Box 169
Barrow, Alaska 99723
Phone: (907) 852-5311

Lee Clune, Superintendent
Delta/Greely School District
P.O. Box 527
Delta Junction, Alaska 99737
Phone: (907) 895-4657

Dan Beck, Assistant Superintendent
Delta/Greely School District
P.O. Box 527
Delta Junction, Alaska 99737
Phone: (907) 895-4657

Richard Schultz, Senator
Alaska State Legislature
Tok, Alaska 99780
Phone: (907) 893-5859

Richard Anderson
School Board Member
P.O. Box 809
Delta Junction, Alaska 99737
Phone: (907) 872-3188

STATE OF ALASKA
Boards and Commissions

LC

JUDICIAL COUNCIL

BOARD: Alaska Judicial Council

BOARD IDENTIFICATION NUMBER: 053

DEPARTMENT: Judicial Branch

AUTHORITY: AK Const. Art. IV Sec. 8

STATUS: Active

SUNSET DATE:

REQUIREMENTS: Legislative Confirmation and Financial Disclosure

PROHIBITIONS: Members may not serve on the Commission on Judicial Conduct simultaneously, no member, except the Chief Justice, may hold any other office or position of profit under the U.S. or State of Alaska

TERM: 6 years

DESCRIPTION: 7 members - 3 non-attorney members appointed by Governor, with regard to area representation and without regard to political affiliation, (only non-attorney members require legislative confirmation), 3 attorneys appointed by the Bar Association, and Chief Justice (ex-officio and chair)

FUNCTION: Nominates persons to Governor for any vacancy in an office of supreme court justice, court of appeals judge, superior court judge, district court judge, the public defender, or administrative tax law judges (Governor appoints one of two or more persons nominated by Council), conducts studies for improvement of the administration of justice, evaluates judges standing for retention election and publicizes findings and recommendations

CHAIR: Chief Justice

SPECIAL FACTS: Quorum - 4 members; reports to Supreme Court/Legislature at least every 2 years

COMPENSATION: Standard Travel and Per Diem

MEETINGS: About 4 times per year for full Council; 1-2 days each

FOR FURTHER INFORMATION CONTACT:

Mr. Larry Cohn
Executive Director
AJC, 1029 West Third Avenue, Ste 201
Anchorage, AK 99501-1969
Phone: (907) 279-2526, FAX: (907) 276-5046
E-MAIL ADDRESS: lcohn@ajc.state.ak.us
WEBSITE: www.ajc.state.ak.us

STATE OF ALASKA - OFFICE OF THE GOVERNOR

Boards and Commissions Office

Membership Roster

JUDICIAL COUNCIL (053)

Member Seat Designation Address	Date Appointed	Reappointed	Term Expires
Eleanor Andrews Public/Governor's Appointment CEO The Andrews Group, Inc. 2627 C Street Anchorage, AK 99503	11/15/2000	3/28/2001	3/1/2007
Alexander O. Bryner, Esq. Chief Justice/Designated Supreme Court Justice Alaska Supreme Court 303 K Street Anchorage, AK 99501-2084	7/1/2003		6/30/2004
Geoffrey G. Currall Attorney/Alaska Bar Appointment Keene & Currall 540 Water Street, Suite 302 Ketchikan, AK 99901	2/24/1998		2/23/2004
Bill Gordon Public/Governor's Appointment 3205 Riverview Drive Fairbanks, AK 99709	5/19/2003		3/1/2009
Robert B. Groseclose, Esq. Attorney/Alaska Bar Appointment Cook, Schuhmann & Groseclose, Inc 714 Fourth Avenue, Suite 200 Fairbanks, AK 99701-4470	4/5/2000		2/23/2006
Susan Orlansky, Esq. Attorney/Alaska Bar Appointment Feldman and Orlansky 500 L Street, Suite 400 Anchorage, AK 99501	3/14/2002		2/23/2008
Christena E Williams Public/Governor's Appointment 755 Grant Street Ketchikan, AK 99901	4/13/2005		3/1/2011

