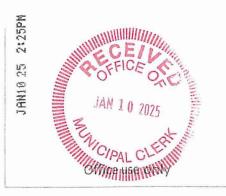
Municipality of Anchorage Declaration of Candidacy Form

DISTRICT 2 - SEAT A – Chugiak, Eagle River, JBER
Term ends 2028



I hereby declare my candidacy for an Assembly Seat for the Municipality of Anchorage, and agree to serve, if elected, for a 3-year term, expiring upon certification of the April 2028 Regular Municipal Election. I do hereby swear (affirm) that:

(1) I am a qualified voter of Anchorage;

Rev 11/2024

- (2) I have been a resident of Assembly District 2 for at least one year; and
- (3) I commit to remain a resident of Assembly District 2 while in office.

It is further understood that I may withdraw my declaration of candidacy at any time by filing a statement under oath with the Municipal Clerk in accordance with AMC 28.30.030D. I understand that if I file my request to withdraw after 5:00 p.m. on January 28, 2025, the Municipal Clerk has the sole discretion to remove my name from subsequent notices and the ballot.

The following information will appear on the municipal election website. Please write legibly. 1963 N. Mitket Lf Eagle RING MK 99577
Residence Address, City, State, and Zip Code PC SCX 770556 Eagle River, Mailing Address, City, State, and Zip Code Office Phone Number & Fax Number info@jared foralaska com Jared foralaska com

Email Address I hereby swear (affirm) that the above declaration and all statements contained herein are true and correct. DATED THIS & day of January Signature of Candidate State of Alaska THIS IS TO CERTIFY that on this day of day o instrument and he/she acknowledged to me that he/she signed the same freely and voluntarily for the uses and purposes therein stated. WITNESS, my hand and official seal the day and year last written above. Notary Public in and for Alaska 3 My Commission expires: _



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POFD FORM

COMPLETED

Submission Date: **01/10/2025**

FILER INFORMATION

First Name: **Jared**Last Name: **Goecker**

Address: 19631 N Mitkof Loop

City, State Zip: Eagle River, Alaska 99577

Contact Phone: 9075272427

Alternate Phone: Nothing to Report Fax (Optional): Nothing to Report Email: jared.goecker@gmail.com

Partner Type: Spouse

Spouse/Domestic Partner Name: Larissa Murray

Dependent Children: 1 Non-Dependent Children: 0

PURPOSE OF FILING

Report Year: 2025

Report Dates: From **01/01/2024** Through **12/31/2024**

Filing As: Municipal Candidate

Municipality: Anchorage, City and Borough

Office: Assembly

Report Type: Candidate

INCOME

Owner	Type	Detail	Description	Amount
Filer	Salaried	Municipality of Anchorage Full-time From: 01/01/2024 Through 07/01/2024	Human Resources Deputy Director	\$100,000 - \$200,000

		Time Worked:	1	1
Spouse	Salaried	Alaska Permanent Fund Corporation	IT	\$50,000 - \$100,000
		Full-time From: 01/01/2024 Through 12/31/2024 Time Worked:		
Filer	Salaried	Chugiak Senior Center Part-time From: 09/20/2024 Through 12/31/2024 Time Worked: 20hrs	HR Director	\$5,000 - \$10,000
Child	Dividend or Interest	PFD		\$1,000 - \$2,000
Filer	Dividend or Interest	PFD		\$1,000 - \$2,000
Spouse	Dividend or Interest	PFD		\$1,000 - \$2,000

Interests

Owner	Туре	Detail	Description / Interest
		No Interests / Noth	ning to Report

LOANS AND DEBTS

Owner	Туре	Name
Filer, Spouse	Lender	Mortgage
Filer	Lender	Car Ioan
Spouse	Lender	Student loans

LEASES

Owner	Type of Lease	Lease/Contract ID	Interest	Status	Description
		No Leases / Nothing to	Report		

CLOSE ECONOMIC ASSOCIATIONS

Associated Person	Description
No Associations / Nothing	to Report

LOBBYIST PARTNER EMPLOYERS

Name	Address	Compensation
	No Lobbyist Partner Employe	rs / Nothing to Report