Municipality of Anchorage Declaration of Candidacy Form

Service Area Board of Supervisors Term ends 2028



I hereby declare my candidacy for the Regular Municipal Election. I do hereby swear (affirm) that: (1) I am a qualified voter of the municipality; and (2) I have been a resident of the service area stated above election. (You are certifying that you have been a resident of the service area.	ve for 90 days immediately preceding the April 1, 2025
It is further understood that I may withdraw my declaration of the Municipal Clerk in accordance with AMC 28.30.030D. I un January 28, 2025, the Municipal Clerk has the sole discretion	derstand that if I file my request to withdraw after 5:00 p.m. o
The following information will appear on the municipal elec	tion website. Please write legibly.
Claire Steffens Candidate Name	Claire Steffens Name as it should appear on ballot
17000 Carl St., Anchorage	Dx 99.516
Residence Address, City, State, and Zip Code	1 1/2/0
P.O.B. 110253, Archocage	, Ax 99511-0253
Mailing Address, City, State, and Zip Code	
907-345-7058	NIA
Phone Number	Office Phone Number & Fax Number
LRSA Claire as Yahoo cem	NA
Email Address	Website Address
I hereby swear (affirm) that the above declaration and all star	tements contained herein are true and correct.
Colfee Steffens	DATED THIS Page day of January, 2025
Signature of Candidate	
State of Alaska))SS	
Third Judicial District) THIS IS TO CERTIFY that on this day of John May, 2025, before me the undersigned, a Notary Public in and for the State of Alaska, personally appeared known to me and known to be the individual named in and who executed the foregoing 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 My Commission expires:

Rev. 11/2024