

## **POSSIBLE MOTION**

I MOVE TO approve registering with the Alaska Public Offices Commission to advocate for passage of the two proposed ballot propositions contained in Ordinances 2011-32 and 33 and authorize expenditure up to \$10,000 for this purpose, and further noting that this motion is contingent on the passage of Ordinances 2011-32 and/or 2011-33.

# ALASKA PUBLIC OFFICES COMMISSION



ANCHORAGE  
2221 E. Northern Lights, Room 128  
Anchorage, AK 99508-4149  
Phone: (907) 276-4176 or  
Toll free: (800) 478-4176  
Fax: (907) 276-7018

<http://doa.alaska.gov/apoc>

JUNEAU  
240 Main St. #500  
PO Box 110222  
Juneau, AK 99811  
Phone: (907) 465-4864  
Fax: (907) 465-4832

## 2011 GROUP REGISTRATION FORM

**1. Group Name** (Write the group name as it appears on all communications and spell out acronyms):

**CITY AND BOROUGH OF SITKA/  
SITKA COMMUNITY HOSPITAL**

**2. Group Purpose** (Describe the purpose of your group in one or two sentences):

To advocate for passage of Ballot Propositions<sup>1</sup> related to Ordinance 2011-32 concerning establishing a dedicated fund for Sitka Community Hospital Roof, Equipment and Infrastructure.

**NOTE:** All filings submitted to APOC are public records and are available to the public as submitted. DO NOT include any of the following personal information: social security numbers, account numbers, credit card numbers, copies of checks, financial records with account numbers or access codes, or any documents with personal identification numbers.

**3. GROUP MAILING ADDRESS: 100 Lincoln Street, Room 307 Sitka, AK 99835**

**4. GROUP OFFICERS** (please provide email addresses for the Chair and Treasurer):

**Chair:** Jim Dinley, Municipal Administrator      Address: 100 Lincoln Street, Room 307 Sitka, AK 99835

Contact Phone: 907-747-1808      **Contact Email:** [Jim\\_Dinley@cityofsitka.com](mailto:Jim_Dinley@cityofsitka.com) Fax: 907-747-7403

**Treasurer:** John Sweeney III      Address: 100 Lincoln Street, Sitka, AK 99835

Contact Phone: 907-747-1836      **Contact Email:** [jay@cityofsitka.com](mailto:jay@cityofsitka.com) Fax: 907-747-0536

**Deputy Treasurer(s): (Name and Address)**

Sitka Community Hospital David Arp

209 Moller Avenue, Sitka, AK 99835

**5. CAMPAIGN PLANS** (Check all that apply) Our group plans to spend money campaigning in the:

\_\_\_\_\_ **2011** Special Municipal Election in \_\_\_\_\_ Election Date: \_\_\_\_\_

\_\_\_\_\_ **2011** Anchorage Election Election Date: **April 5, 2011**

☒ **2011** Statewide Municipal Elections in Sitka Alaska Election Date: **October 4, 2011**

\_\_\_\_\_ Our group does not plan to campaign in **2011**, but will collect or expend money to influence **2012** elections, to pay debts or administrative expenses. **Note:** The group must file a Year-End Report.

\_\_\_\_\_ Our group is an initiative proposal application group and is active before the initiative is certified for the ballot in an election. **Note:** The group must amend its registration, indicate the election in which it will be active, and may have to change its name if the initiative application is certified for the ballot in an election and the group intends to support or oppose the initiative.

x   Disbanding: Our group will disband during **2011**. We have no plans to re-form and will close out our campaign account. **Note:** File a final report within 10 days of closing the campaign account.

**NOTE: If your campaign plans change during the year, immediately update your registration. If you are active in an election and do not register and report, the group is subject to civil penalties.**

**6. TYPE OF GROUP** (Identify all that apply)

       **MEMBER OR EMPLOYEE PAC (Political Action Committee)**

Name of associated organization: \_\_\_\_\_

Type of organization: Labor        Trade        Corporation        Other       

       **POLITICAL PARTY**

       Central party (**Include a list of recognized subordinate units**)        Subordinate unit of a political party  
(Examples of subordinate units are the Mat-Su Democrats and the Capital City Republicans)

  x   **BALLOT PROPOSITION GROUP**

  x   SINGLE ISSUE group formed to   x   support or        oppose a ballot proposition.

Title and subject of the ballot proposition:

Proposition No. 1

Shall the laws of the City and Borough of Sitka be amended to raise the property tax limit from 6 mills to 6.25 mills to help fund a new roof, equipment and infrastructure for Sitka Community Hospital and place the revenues gained into a dedicated fund?

       **INITIATIVE PROPOSAL APPLICATION GROUP** (A group organized for the purpose of filing an initiative proposal application, or who has filed an initiative proposal application, or who has organized for the purpose of influencing the outcome of an initiative proposal application)

Title and subject of initiative proposal application: \_\_\_\_\_

       **CONTROLLED GROUP** (A group which is organized specifically to support only one candidate or which plans to spend more than 50% of its funds to support a single candidate) Candidate's name: \_\_\_\_\_

       **DRAFT GROUP** (Organized to attempt to draft an individual to become a candidate)

Candidate's name: \_\_\_\_\_

       **SPECIAL INTEREST GROUP** (Select if your group is not one of the specific types or groups listed above)

**8. BANK ACCOUNTS/CAMPAIGN DEPOSITORY**

Provide the name and location of the regulated banking institution that holds your campaign account if your group intends to raise or spend more than \$5,000 during 2011 or plans to be active in more than one election.

NAME OF BANK First National Bank LOCATION Sitka, Alaska.

**The treasurer must sign all campaign disclosure reports. AS 15.13.060(a)**

| Certification   |                       |      |
|---|-----------------------|------|
| I certify (or declare) under penalty of perjury that the above information is true, complete, and correct to the best | Treasurer's Signature | Date |
|   |                       |      |

|                  |   |                     |
|------------------|---|---------------------|
| of my knowledge. | Printed name of treasurer<br><br>John Sweeney III | FOR OFFICE USE ONLY |
|------------------|---|---------------------|

## **GROUP REGISTRATION FREQUENTLY ASKED QUESTIONS**

### **1. What is a Group?**

Two or more individuals organized and acting together for the principal purpose of:

- Influencing or taking major steps to influence the outcome of an election or an initiative proposal application
- Intending to file an initiative proposal application under AS 15.45.020
- Filing an initiative proposal application under AS 15.45.020
- Refer to AS 15.13.400(8) and 2 AAC 50.290 for more information.

### **2. What is an Expenditure?**

A purchase or transfer of money or anything of value, or a promise or agreement to purchase or transfer money or anything of value, incurred or made for the purpose of:

- Influencing the nomination or election of a candidate
- Use by a political party
- Influencing the outcome of a ballot proposition
- Supporting or opposing an initiative proposal application

The payment by a person, other than a candidate or political party, of compensation for the services of another person that are rendered to the candidate or party.

Refer to AS 15.13.400(6) for more information.

### **3. Who Must File This Form?**

Each person<sup>1</sup> other than an individual must register with APOC before making an expenditure in support of or in opposition to a candidate, a ballot proposition, or an initiative proposal application. Refer to AS 15.13.050 for more information.

### **4. Are There Restrictions On Group Names?**

Group names must include:

- The title or common name of the initiative if the group intends to spend 50% or more of its funds in support of or in opposition to a single ballot initiative.
- The candidate's name if the group intends to spend 33.3% or more of its funds in support of or in opposition to one candidate.
- "Opposes," "opposing," or "against" or similar words if the group is opposing a candidate or ballot initiative.
- Refer to AS 15.13.050(b) and (c) for more information.

### **5. When Does My Group Have To Register?**

This registration is valid only for the election cycle selected in Section 5 of the Group Registration Form. You must file a new registration with APOC before making an expenditure in any other election and at the beginning of every year until the group disbands.

<sup>1</sup> The definition of person includes a natural person, corporations, companies, partnerships, firms, associations, organizations, business trusts, societies, labor unions, nongroup entities, and groups. AS 01.10.60(8), AS 15.13.400 (14).

**6. How Do I Submit The Group Registration Form?**

By mail, hand delivery, or fax via the address information listed on page 1, or by e-mailing a completed .pdf version to [DOA.APOC.REPORTS@alaska.gov](mailto:DOA.APOC.REPORTS@alaska.gov).

# ALASKA PUBLIC OFFICES COMMISSION



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## 2011 GROUP REGISTRATION FORM

**1. Group Name** (Write the group name as it appears on all communications and spell out acronyms):

**CITY AND BOROUGH OF SITKA**

**2. Group Purpose** (Describe the purpose of your group in one or two sentences):

To advocate for passage of Ballot Proposition 2 related to Ordinance 2011-33 concerning establishing a dedicated fund for Reconstruction and Maintenance of municipal roads.

**NOTE:** All filings submitted to APOC are public records and are available to the public as submitted. DO NOT include any of the following personal information: social security numbers, account numbers, credit card numbers, copies of checks, financial records with account numbers or access codes, or any documents with personal identification numbers.

**3. GROUP MAILING ADDRESS:** 100 Lincoln Street, Room 307 Sitka, AK 99835

**4. GROUP OFFICERS** (please provide email addresses for the Chair and Treasurer):

**Chair:** Jim Dinley, Municipal Administrator      Address: 100 Lincoln Street, Room 307 Sitka, AK 99835

Contact Phone: 907-747-1808      **Contact Email:** Jim [Dinley@cityofsitka.com](mailto:Dinley@cityofsitka.com) Fax: 907-747-7403

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Contact Phone: 907-747-1836      **Contact Email:** [jay@cityofsitka.com](mailto:jay@cityofsitka.com) Fax: 907-747-0536

**Deputy Treasurer(s): (Name and Address)**

Larry Fitzimmons      100 Lincoln Street Sitka, AK 99835

**5. CAMPAIGN PLANS** (Check all that apply) Our group plans to spend money campaigning in the:

\_\_\_\_\_ **2011** Special Municipal Election in \_\_\_\_\_ Election Date: \_\_\_\_\_

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       **POLITICAL PARTY**

       Central party (**Include a list of recognized subordinate units**)        Subordinate unit of a political party  
(Examples of subordinate units are the Mat-Su Democrats and the Capital City Republicans)

  x   **BALLOT PROPOSITION GROUP**

  x   SINGLE ISSUE group formed to   x   support or        oppose a ballot proposition.

Title and subject of the ballot proposition:

Proposition No. 2

Shall the laws of the City and Borough of Sitka be amended to increase the sales tax in the October 1-March 31 period from 5% to 6% for the reconstruction and maintenance of municipal roads and place the revenues gained into a dedicated fund?

       **INITIATIVE PROPOSAL APPLICATION GROUP** (A group organized for the purpose of filing an initiative proposal application, or who has filed an initiative proposal application, or who has organized for the purpose of influencing the outcome of an initiative proposal application)

Title and subject of initiative proposal application: \_\_\_\_\_

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NAME OF BANK First National Bank LOCATION Sitka, Alaska.

**The treasurer must sign all campaign disclosure reports. AS 15.13.060(a)**

| Certification   |                       |      |
|---|-----------------------|------|
| I certify (or declare) under penalty of perjury that the above information is true, complete, and correct to the best | Treasurer's Signature | Date |
|   |                       |      |

|                  |   |                     |
|------------------|---|---------------------|
| of my knowledge. | Printed name of treasurer<br><br>John Sweeney III | FOR OFFICE USE ONLY |
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