

**North Slope Borough
Assembly / Clerk's
P.O. Box 69
Barrow, Alaska 99723
Phone: 907 852 0360
Fax: 907 852 0229**



Borough Clerk, Sheila Burke
Deputy Clerk, Elaine Solomon

www.north-slope.org

To: Interested Candidate for Mayoral, Assembly Seats or School Board Seats
From: Sheila Burke, CMC, Borough Clerk
Date: June 26, 2026
Subject: 2026 NSB Nominating Petition Forms

The NSB Nominating Petition Begins on July 8, 2026, Ends August 27, 2026 @ 5:00 p.m. for the Interested Candidates to get their Name to Appear on Ballot for the NSB Regular Election to be held on October 6, 2026.

Please Read Both Sides to get an Understanding of How to Get Your Name on the NSB Official Ballot. The NSB Clerks office Will Not Accept Complete/ Incomplete Forms After the Deadline.

All Forms Must Be Completed by the Interested Candidate. If the you have any questions for:

1. NSB Nominating Petition call the NSB Clerks Office 907.852.0360
2. APOC / POFD forms call 1-800-478-4176

Note: It is the Responsibility of the Interested Candidate to Send the NSB Nominating Petition & APOC Completed Forms to the NSB Clerks Office by August 27, 2026.

The NSB Village Offices Will Not Accept Any Completed NSB Nominating Petition or APOC forms from any Interested Candidate. Only to Scan and Email to the NSB Clerks Office

The Interested Candidate can have the Completed Nominating Petition & APOC forms Scanned and emailed to the NSB Clerks thru the NSB Office in your Village before you Send to the NSB Clerks office.

Please Read Back Side

NSB Nominating Petition Checklist

**The Completed Forms Must Be Turned in All Together
As “One Instrument”**

- **Signed NSB Nominating Petition**
- **Public Office Financial Disclosure (POFD)**
- **Municipal Candidate Registration**
- **Municipal Letter of Intent**
- **Municipal Letter of Exemption**

**If the NSB Nominating Petition Forms is Not Completed
according to the NSB Code, the Clerk’s office Shall
Return to the Candidate for Completion**

A Completed North Slope Borough Nominating Petition Shall Not Be Accepted
earlier than **July 8, 2026** or No Later Than **August 27, 2026 @ 5:00 p.m.**

Candidates Name Withdrawal Deadline is on August 28, 2026 @ 5:00 p.m.

In accordance with AS § 15.13, an Alaska Public Offices Commission (APOC)
“Municipal Exemption Statement” (if candidate intends to spend or raise less than \$5,000
in seeking election) OR “Candidate Registration” must be filed.

Additionally, in accordance with AS § 39.50 an APOC “Financial Disclosure Statement”
must be filed with the Borough Clerk at the time of filing a petition unless you are an
incumbent and one is already on file with APOC for the year 2026.

North Slope Borough Nominating Petition

We, the undersigned qualified voters of the North Slope Borough, in the State of Alaska, hereby Nominate and Sponsor _____, Whose Residence is, _____ for the office of _____, to be voted for at the election to be held on the 6th day of October, 2026.

We individually certify that we are qualified to vote for a candidate for the office this candidate seeks, and that we have not signed other nominating petitions for this office.

No.	Print Name	Signature	House Number & Street Name <u>Physical Address</u>	City	DOB or Last Four # of SS#	Date Signed
1.			PO Box will NOT be accepted			
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

No.	Print Name	Signature	House Number & Street Name <u>Physical Address</u> PO Box will NOT be accepted	City	DOB or Last Four # of SS#	Date Signed
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
31.						
32.						
33.						

No.	Print Name	Signature	House Number & Street Name <u>Physical Address</u> PO Box will NOT be accepted	City	DOB or Last Four # of SS#	Date Signed
33.						
34.						
35.						
36.						
37.						
38.						
39.						
40.						
41.						
42.						
43.						
44.						
45.						
46.						
47.						
48.						
49.						
50.						

Print your Name on How You Want to Appear on the Ballot

Acceptance of Nomination by Candidate

I Hereby Accept the Above Nomination and Agree to Serve if Elected

Signature of Candidate

Dated

<u>CLERKS OFFICE USE ONLY</u>	
<u>PETITION FILED BY</u>	<u>PHYSICAL ADDRESS</u>
<u>DATE & HOUR OF FILING</u>	<u>RECEIVED BY</u>
<u>CONTACT PHONE #</u>	<u>TODAYS DATE</u>
<u>NUMBER</u>	<u>TOTAL NUMBER OF SIGNATURES</u>
<u># REGISTERED VOTERS</u>	<u># NOT REGISTERED VOTERS</u>
<u># SIGNED TWICE</u>	<u># BAD ADDRESS</u>

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
 Website: www.doa.alaska.gov/apoc
 Email: apoc@alaska.gov

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

MUNICIPAL LETTER OF INTENT

The Letter of Intent can be filed 18 months prior to the election. It permits a candidate to make campaign expenditures and to accept contributions prior to formally declaring for office with the municipal clerk. Other individuals may not accept contributions or make expenditures on behalf of the campaign, unless first registered on a Candidate Registration or Municipal Exemption Statement. AS 15.13.067; AS 15.13.076; AS 15.13.100; 2 AAC 50.274

Please note that unless a candidate meets the specific criteria found in AS 15.13.040(m)(1), they are required to file all forms and reports electronically, through the APOC Forms Online Filing System (<https://my.alaska.gov/>).

A candidate's use of corporate, state, or municipal resources (i.e., office phone/address, equipment, staff time, etc.) for campaign purposes is prohibited. AS 15.13.074(f); AS 15.13.145

CANDIDATE NAME: _____

CAMPAIGN ADDRESS: _____

CAMPAIGN PHONE: _____ CAMPAIGN EMAIL: _____

I INTEND TO BE A CANDIDATE IN THE FOLLOWING ELECTION:

Month:	Office / Race: (Optional)
Year:	District / Seat: (Optional)
Municipality / Borough:	

Certification: I certify that the information contained in the foregoing document is true, complete, and correct.

By submitting this Letter of Intent I certify that I will comply with the requirements of AS 15.13.	Signature	Date
	Printed name	

NOTICE: Candidates who loan personal funds to their campaign with the intent to repay themselves after the election may only do so if they file a Candidate Reimbursement Form within 5 days of putting personal funds into their campaign. If the campaign is able to repay the candidate's personal funds within 72 hours they may do so, and they do not need to file the Reimbursement Form. AS 15.13.078(b); AS 15.13.116(a)(4); 2 AAC 50.990(7)(c)(x)

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**MUNICIPAL EXEMPTION
 STATEMENT**

Municipal candidates that do not intend to raise/spend more than \$5,000, including their personal funds, may file a Municipal Exemption Form. Exempt candidates are not required to file campaign disclosure reports during their campaign. If an exempt candidate exceeds \$5,000 in financial activity they must immediately file a Candidate Registration and file each report due after the change in status, disclosing all activity from the beginning of the campaign on their first report.

AS 15.13.040(g); 2 AAC 50.286.

Please note that unless a candidate meets the specific criteria found in AS 15.13.040(m)(1), they are required to file all forms and reports electronically, through the APOC Forms Online Filing System (<https://my.alaska.gov/>).

A candidate's use of corporate, state, or municipal resources (i.e., office phone/address, equipment, staff time, etc.) for campaign purposes is prohibited. AS 15.13.074(f); AS 15.13.145

CANDIDATE NAME: _____

CAMPAIGN ADDRESS: _____

CAMPAIGN PHONE: _____ CAMPAIGN EMAIL: _____

Election Month and Year:	Office / Race: (Optional)
Municipality / Borough:	District / Seat: (Optional)

Certification: I certify that the information contained in the foregoing document is true, complete, and correct.

I do not intend to raise/spend more than \$5,000 (including personal money) during my entire campaign for municipal office.	Signature	Date
	Printed name	

NOTICE: Candidates who loan personal funds to their campaign with the intent to repay themselves after the election may only do so if they file a Candidate Reimbursement Form within 5 days of putting personal funds into their campaign. If the campaign is able to repay the candidate's personal funds within 72 hours they may do so, and they do not need to file the Reimbursement Form. AS 15.13.078(b); AS 15.13.116(a)(4); 2 AAC 50.990(7)(c)(x)

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**MUNICIPAL CANDIDATE
 REGISTRATION**

Unless an exemption statement is filed, municipal candidates must file a Candidate Registration within 7 days of filing a declaration of candidacy or nominating petition with the clerk’s office. The registration provides contact information and designates campaign officers. Only registered campaign officers are permitted to accept/spend contributions on behalf of the campaign, or be reimbursed. Registered candidates must file campaign disclosure reports for the duration of their campaign.

AS 15.13.060; 2 AAC 50.282; 2 AAC 50.298.

Please note that unless a candidate meets the specific criteria found in AS 15.13.040(m)(1), they are required to file all forms and reports electronically, through the APOC Forms Online Filing System (<https://my.alaska.gov/>).

A candidate’s use of corporate, state, or municipal resources (i.e., office phone/address, equipment, staff time, etc.) for campaign purposes is prohibited. AS 15.13.074(f); AS 15.13.145

Candidate Name:	Campaign Committee Name: (Optional)
Election Month and Year:	Municipality / Borough:
Campaign Mailing Address:	Campaign Email:
Campaign Phone:	Additional Email:
Campaign Depository: (DO NOT list account number)	Campaign Depository Address:

Treasurer Name:	Treasurer Phone:
Treasurer Mailing Address:	Treasurer Email:
Deputy Treasurer(s): _____ _____ _____	Address(s): _____ _____ _____

I certify that the information contained in the foregoing document is true, complete, and correct.	Signature	Date
	Printed name	

NOTICE: Candidates who loan personal funds to their campaign with the intent to repay themselves after the election may only do so if they file a Candidate Reimbursement Form within 5 days of putting personal funds into their campaign. If the campaign is able to repay the candidate’s personal funds within 72 hours they may do so, and they do not need to file the Reimbursement Form. AS 15.13.078(b); AS 15.13.116(a)(4); 2 AAC 50.990(7)(c)(x)

ALASKA PUBLIC OFFICES COMMISSION

2026 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2025

Clerk Received Date

APOC Received Date

POFD for Municipal Officers and Candidates

You may only file this paper POFD if you are a municipal officer or municipal candidate and are serving or seeking office in a municipality with a population of less than 15,000

All other filers must file electronically via myAlaska: <https://my.alaska.gov/>

If you are a municipal candidate and already have a current POFD on file you do not need to file a candidate POFD (AS 15.13.030)

Contact APOC

Anchorage: 2221 E. Northern Lights Blvd., Rm. 128, Anchorage, AK 99508 / 907-276-4176 / Fax 907-276-7018

Juneau: 240 Main St., Rm. 201 / P.O. Box 110222, Juneau, AK 99811 / 907-465-4864 / Fax 907-465-4832

Toll-free in-state: 800-478-4176 / Online: <http://doa.alaska.gov/apoc/> E-mail: apoc@alaska.gov

This is a public record – Do not include information such as social security or account numbers

If you have nothing to report in a section, check NONE. Attach additional pages where needed

Filing as a Municipal: Office Holder Candidate

Statement Type:

Candidate POFD: Due when filing declaration of candidacy or nominating petition.

Initial POFD: Due 30 days from appointment.

Annual POFD: Due by March 15 each year after appointment.

Municipality or Borough: _____

Position: Borough/City Mayor Assembly member Councilmember School Board Member

Elected Utility Board Member Borough/City Manager Planning or Zoning Commission

NAME: _____

E-MAIL: _____

PHONE: _____ **FAX:** _____

MAILING ADDRESS: _____

SPOUSE'S NAME: _____

NUMBER OF DEPENDENT CHILDREN: _____

ALASKA PUBLIC OFFICES COMMISSION
2026 Public Official Financial Disclosure
Covering Jan. 1– Dec. 31, 2025

SALARIED EMPLOYMENT INCOME

NONE:

Income is anything of value and covers all forms of compensation or benefits from an employer including wages, salary, commissions, tips, bonuses, housing, use of an automobile and deferred compensation. Report each employer who paid you, your spouse, or children more than \$1,000. Include amount, dates and terms of employment, and time worked.

Amounts of income may be stated in these ranges: (1) \$250-\$1,000 gifts only; (2) \$1,000-\$2,000; (3) \$2,000-\$5,000; (4) \$5,000-\$10,000; (5) \$10,000-\$20,000; (6) \$20,000-\$50,000; (7) \$50,000-\$100,000; (8) \$100,000-\$200,000; (9) \$200,000-\$500,000; (10) \$500,000-\$1,000,000; (11) \$1,000,000 or more

Earned By: Filer Spouse Child

Full-time Part-time Seasonal Commission Project Hourly

Income Amount: \$ _____

Dates and amount of time worked: _____

Employer: _____

Address: _____

Description: _____

Earned By: Filer Spouse Child

Full-time Part-time Seasonal Commission Project Hourly

Income Amount: \$ _____

Dates and amount of time worked: _____

Employer: _____

Address: _____

Description: _____

Earned By: Filer Spouse Child

Full-time Part-time Seasonal Commission Project Hourly

Income Amount: \$ _____

Dates and amount of time worked: _____

Employer: _____

Address: _____

Description: _____

ALASKA PUBLIC OFFICES COMMISSION

2026 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2025

SELF-EMPLOYMENT INCOME

NONE:

List each source of self-employment income over \$1,000. See AS 39.50.200(10), source of income, 2 AAC 50.799(a), definition of self-employment, 2 AAC 50.695, reporting deferred income; and 2 AAC 50.700 for details. Disclose each client, customer or business that paid you and/or your family members more than \$1,000. Self-employment includes sole proprietors, partnerships, limited liability companies and professional corporations. Disclose income from corporations in which the filer and/or family members, hold a controlling interest (2 AAC 50.700(b)). Exemptions: To obtain an exemption You must file a written request and receive an exemption from the commission (2 AAC 50.775, 2 AAC 50.821).

Earned By: Filer Spouse Child

Full-time Part-time Seasonal Commission Project Hourly

Income Amount: \$ _____

Dates worked: _____ Amount of time worked: _____

Business name: _____

Client name and address: _____

Client name and address: _____

Description of services: _____

Earned By: Filer Spouse Child

Full-time Part-time Seasonal Commission Project Hourly

Income Amount: \$ _____

Dates worked: _____ Amount of time worked: _____

Business name: _____

Client name and address: _____

Client name and address: _____

Description of services: _____

RENTAL INCOME

NONE:

If any person paid you and/or your family members more than \$1,000 in rent during the preceding calendar year, report the name of the person and amount paid. If the property is managed by a person other than the filer or a family member, list the manager's name. Disclose the location of the property under Real Property Interests.

OWNER:	TENANT NAMES	AMOUNT
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Co-Owners		

ALASKA PUBLIC OFFICES COMMISSION

2026 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2025

DIVIDEND AND INTEREST INCOME

NONE:

If more than \$1,000, disclose dividends, interest and other distributions of earnings from a business or investment. Include dividends or interest from bank accounts, capital gains, money market accounts, certificates of deposit, and Native corporation dividends. PFDs are only applicable if more than \$1,000.

RECIPIENT	SOURCE	AMOUNT
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		

OTHER INCOME

NONE:

List source and amount of income over \$1,000 not listed elsewhere on this form, including sale of goods or property, taxable capital gains, pensions, retirement cash-outs, government entitlements, alimony or child support payments, honoraria and any other payments not otherwise accounted for.

RECIPIENT	SOURCE	AMOUNT
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse		

GIFTS WORTH MORE THAN \$250

NONE:

Include travel expenses, discounts not available to the public, loans forgiven or paid by a third party. Do not report gifts from spouse, domestic partner, parent, dependent child, sibling, grandparent, aunt, uncle, niece or nephew.

RECIPIENT	DESCRIPTION	SOURCE	VALUE
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse			
<input type="checkbox"/> Filer <input type="checkbox"/> Child <input type="checkbox"/> Spouse			

ALASKA PUBLIC OFFICES COMMISSION

2026 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2025

BUSINESS INTERESTS

NONE:

Report businesses in which the filer or family member: 1) Served as stockholder, owner, officer, director, partner, proprietor, employee, or held an interest. 2) Had ownership interests of more than \$1,000 in a publicly traded corporation, a business, shares in non-publicly traded corporations, sole proprietorships, or limited liability companies. Include options to buy, non-profit organizations, corporations, businesses, associations, and trade groups.

Filer Spouse Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

Filer Spouse Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

Filer Spouse Child Position/Type of interest: _____

Business name: _____

Address: _____

Description: _____

REAL PROPERTY INTERESTS

NONE:

A primary residence or recreational property held for personal use may be described only by zip code (2 AAC 50.720). (Enter 'Not Reported' for address if this applies to you.) Report the nature of the interest held in the property; including fee simple ownership, tenancy in common, general or limited partnership, and holder of an option to purchase. If property is jointly owned, check applicable boxes.

Owner(s): Filer Spouse Child Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

Owner(s): Filer Spouse Child Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

Owner(s): Filer Spouse Child Co-owner: _____

Address or description and zip-code: _____

Ownership interest: _____

ALASKA PUBLIC OFFICES COMMISSION

2026 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2025

TRUSTS, RETIREMENT ACCOUNTS, OR OTHER BENEFICIAL INTERESTS NONE:

Report each trust, retirement account or beneficial interest that exceeded \$1,000 during the reporting period, including a retirement plan, employee pension plans, profit-sharing, family, or education trusts, deferred compensation plans, annuity plans or any other similar arrangements intended to provide future income for the filer and/or family member. Identify individual investments accounts if you and/or family members manage or personally control the investments.

Owned By: Filer Spouse Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

Owned By: Filer Spouse Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

Owned By: Filer Spouse Child Percent Owned: _____

Managed By: _____

Fund or Companies: _____

LOANS, LOAN GUARANTEES, AND DEBTS OVER \$1,000 NONE:

Report each creditor, lender or guarantor to whom more than \$1,000 was owed during the reporting period. List financial obligations, including property owned or sold during the reporting period; loans that have been guaranteed; delinquent taxes; alimony; child support payments; medical bills; boat and vehicle loans; business and personal loans; escrows; student loans; signature loans and promissory notes. Loans include secured, unsecured and contingent loans. Do not list credit card obligations or revolving charge accounts.

Debtor: Filer Spouse Child

Type: Lender Creditor Guarantor Name: _____

Debtor: Filer Spouse Child

Type: Lender Creditor Guarantor Name: _____

Debtor: Filer Spouse Child

Type: Lender Creditor Guarantor Name: _____

ALASKA PUBLIC OFFICES COMMISSION
2026 Public Official Financial Disclosure
Covering Jan. 1– Dec. 31, 2025

GOVERNMENT CONTRACTS AND OFFERS TO CONTRACT

NONE:

List contracts, bids and offers to contract with the state or any state or municipal agency or entity. Report contract interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company, or through a corporation in which filer or family member/s held a controlling interest.

Contractor: Filer Spouse Child Type of Interest: _____

Bid Offer Held Contract ID: _____

Contracting Agency: _____

Description: _____

NATURAL RESOURCE LEASES

NONE:

List mineral, timber, oil and gas leases – held, bid or offered. Report lease interests as individual, sole proprietor, family member, partnership, professional corporation, limited liability company, or corporation in which you and/or a family member held a controlling interest.

Leaseholder: Filer Spouse Child Type of Interest: _____

Bid Offer Held Lease ID: _____

Description: _____

CERTIFICATION

I certify under penalty of perjury that the foregoing is true and the information in this disclosure statement is, to the best of my knowledge, true, correct and complete. A person who knowingly makes a false sworn certification is guilty of perjury.

SIGNATURE: _____

PRINTED NAME

DATE SIGNED

Filers are solely responsible for timely filing complete and accurate forms

File this POFD with the municipal clerk where you hold or seek office.

THIS IS A PUBLIC DOCUMENT