

Council Member Update Form

General Information:

Council Seat: _____ Term Ends: _____

Full Legal Name: _____

DOB: _____ SS#: _____ State of Alaska ID# _____

Physical Address: _____ Mailing Address: _____

Contact Phone Number: _____ Email Address: _____

I hereby certify that:

1. I am a resident of the City of Aniak.
2. I am a registered voter in the State of Alaska.
3. I am or have been, by the date of this declaration, a resident of the City of Aniak for at least one year.
4. I am not disqualified as a voter under Article V of the Alaska Constitution which provides in Section 2 of Voter qualifications.

Date: _____ Signature: _____

ATTESTED BY: _____

City Clerk, Morgan Simeon Date

***Please provide two forms of ID with this form. Thank you.