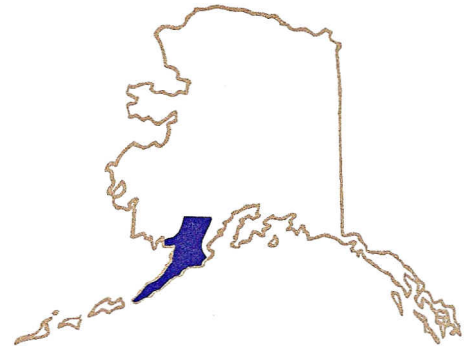


## **Lake and Peninsula Borough**

*P.O. Box 495  
King Salmon, Alaska 99613*

*Telephone: (907) 246-3421  
Fax: (907) 246-6602*



### **NOMINATING PETITION CHECKLIST**

#### **Lake and Peninsula Borough Assembly Member/School Board Member October 6, 2020 General Election**

When returning your petition, please enclose the following:

- Completed Nomination Petition with at least 40 signatures (signers must be registered to vote in your district)
  
- Completed 2020 Public Official Financial Disclosure Statement Form (remember to check the candidate box) note: you may do this on line or on the paper copy attached
  
- Copy of the Letter of Intent (if you intend to accept ANY campaign donations) note: you may do this on line or on the paper copy attached
  
- Copy of one of the completed Campaign Finance Forms (either the Municipal Exemption or Municipal Registration) note: you may do this on line or on the paper copy attached

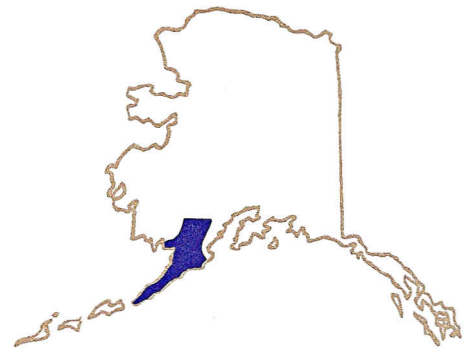
Send the completed packet to:  
Kate Conley, Borough Clerk  
Lake and Peninsula Borough  
PO Box 495  
King Salmon AK 99613



## Lake and Peninsula Borough

P.O. Box 495  
King Salmon, Alaska 99613

Telephone: (907) 246-3421  
Fax: (907) 246-6602

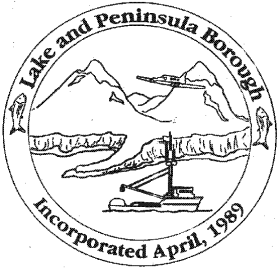


### **NOMINATING PETITION** **Lake and Peninsula Borough** **Assembly Member / School Board Member** **October 6, 2020 General Election**

#### **INSTRUCTIONS:**

1. If you are a qualified voter and **physically reside** within the boundaries of the Lake and Peninsula Borough you may file for the office of Lake and Peninsula Borough Assembly or School Board Member.
2. You must indicate the seat for which you want to run and **must have lived in the borough district to which that seat is assigned for at least one (1) year immediately preceding this election.**
3. Your nominating petition must contain at least twenty-five (25) signatures of registered voters who live within the **same district as the one in which you seek election.** (It is suggested that 28 to 40 people sign your petition to assure that at least 25 are registered and qualified.)
4. Your nominating petition must be hand delivered or received in the Borough offices no sooner than June 8, 2020 and no later than August 22, 2020 and must include a signed and completed **2020 Public Official Financial Disclosure Statement** form. Even if you are an incumbent, a new 2020 Public Official Financial Disclosure Statement Form needs to be completed with the box on the first page checked "candidate."
5. You must also complete and send in your **Letter of Intent** before you begin any campaign activities. If you plan to accept or spend no more than \$5,000 for your campaign, you must complete the **Municipal Exemption Statement.** If you think your campaign will exceed \$5,000, you must complete a **Candidate Registration** form. **MAIL THE APPLICABLE FORM DIRECTLY TO ALASKA PUBLIC OFFICIALS COMMISSION (APOC):** the address is at the bottom of the form. There are serious penalties and fines imposed by the APOC if your form is not filed with them when you file your nominating petition. Please enclose a **copy** with your petition to the Borough.
6. Return your Nominating Petition, 2020 Public Official Financial Disclosure Statement form and the required campaign documents (see item 5) to the Borough Clerk, Lake and Peninsula Borough, P.O. Box 495, King Salmon, Alaska, 99613.
7. There may be additional APOC forms required. Each campaign is different; calling APOC (1-800-478-4176) is highly recommended. Omission in this packet, does not negate your responsibility for filing the State of Alaska requirements.

**CANDIDATE INFORMATION / ACCEPTANCE OF NOMINATION**



I, \_\_\_\_\_, a qualified voter and resident of \_\_\_\_\_, hereby declare myself a candidate for Seat \_\_\_\_\_, for the office of \_\_\_\_\_ which is a term of \_\_\_\_\_ years. Upon election, I agree to serve in office for this term.

(District 1 or 2 or At-Large)

(Assembly Member or School Board Member)

**I request that my name be printed on the ballot in the following way:**

\_\_\_\_\_

(Print name as you want it to appear.)

**Signature of Candidate** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Address of Residence** \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Attest:**

\_\_\_\_\_  
**Borough Clerk**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
**Date**

\_\_\_\_\_ **a.m.** \_\_\_\_\_ **p.m.**  
**Time**

# NOMINATING PETITION

---

(Candidate's Name & Position Sought)

We, the undersigned, **all being qualified voters who reside within the district for which the seat sought by the candidate is assigned,** hereby request that the name of this candidate be placed on the ballot for the Lake and Peninsula Borough Assembly / School Board election to be held Tuesday, October 6, 2020.

<b>Printed Name</b>	<b>Signature</b>	<b>Address</b>	<b>*Voter # or Date of Birth</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			

\*Not required by law but is requested to assist in verification.

---

Printed Name	Signature	Address	*Voter # or Date of Birth
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			

\*Not required by law, but is requested to assist in verification.

Nominating Petitions must be received at the Borough office no later than 5 p.m. on August 22, 2020. Deliver or mail your petition to:

**Borough Clerk, Lake and Peninsula Borough  
P.O. Box 495, King Salmon, Alaska 99613**

ALASKA PUBLIC OFFICES COMMISSION

2020 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2019

Clerk Received Date

APOC Received Date

**POFD for Municipal Officers and Candidates**

**You may file this paper POFD if you are a municipal officer or municipal candidate and serving or seeking office in a municipality with a population 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., Room 128, Anchorage, AK 99508 / 907-276-4176 / Fax 907-276-7018. Juneau: 240 Main St., Room 500 / 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: [doa.apoc@alaska.gov](mailto:doa.apoc@alaska.gov)

This document is public– 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 Municipal:**  Office Holder  Candidate

**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.

**Final POFD:** Due 90 days after leaving office (Include information not reported on previous POFDs).

**Municipality:** \_\_\_\_\_

**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  
2020 Public Official Financial Disclosure  
Covering Jan. 1– Dec. 31, 2019

SALARIED EMPLOYMENT

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 plus.

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**  
 2020 Public Official Financial Disclosure  
 Covering Jan. 1– Dec. 31, 2019

**SELF-EMPLOYMENT**

**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**

2020 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2019

**DIVIDENDS and INTERESTS**

**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

2020 Public Official Financial Disclosure

Covering Jan. 1– Dec. 31, 2019

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**  
2020 Public Official Financial Disclosure  
Covering Jan. 1– Dec. 31, 2019

**TRUSTS, RETIREMENT ACCOUNTS OR OTHER BENEFICIAL INTEREST** **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 & 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 and Name: \_\_\_\_\_

Debtor:  Filer  Spouse  Child

Type:  Lender  Creditor  Guarantor and Name: \_\_\_\_\_

Debtor:  Filer  Spouse  Child

Type:  Lender  Creditor  Guarantor and Name: \_\_\_\_\_

**ALASKA PUBLIC OFFICES COMMISSION**  
2020 Public Official Financial Disclosure  
Covering Jan. 1– Dec. 31, 2019

**GOVERNMENT CONTRACTS & 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:** \_\_\_\_\_

\_\_\_\_\_  
**NAME**

\_\_\_\_\_  
**DATE SIGNED**

Public Officials and Candidates required to file POFDs are solely responsible for filing complete, accurate and truthful forms by the deadlines.

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

**ALASKA PUBLIC OFFICES COMMISSION**  
2020 Public Official Financial Disclosure  
Covering Jan. 1– Dec. 31, 2019

**THIS IS A PUBLIC DOCUMENT**

# 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](http://www.doa.alaska.gov/apoc)  
 Email: [apoc@alaska.gov](mailto:apoc@alaska.gov)

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

## 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.**

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



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](http://www.doa.alaska.gov/apoc)  
 Email: [apoc@alaska.gov](mailto: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)