

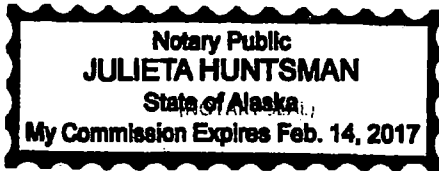


**KENAI PENINSULA BOROUGH
APPLICATION FOR APPOINTMENT - SERVICE AREA**

This form must be completed in its entirety or the application will not be validated. Corrections must be initiated.

GENERAL INFORMATION <small>(Please Print or Type)</small>			
I, <u>Dawson Slaughter</u> , am a qualified voter and declare myself to be a resident and applicant for nomination to the office of:			
<u>Anchor Point Fire & Emergency Medical Service Area</u>		SERVICE AREA	SEAT <u>D</u>
RESIDENCY INFORMATION			
My current physical residence address is: <u>34290 Eason LN Anchor Point, AK 99556</u>			
I have been a resident of the Kenai Peninsula Borough since: <u>1995</u>			
and a resident of the service area in which I am seeking office since: <u>1995</u>			
My full mailing address is: <u>PO BOX 1065 Anchor Point, AK 99556</u>			
CERTIFICATION			
I, the undersigned, certify that the information in this Application for Appointment is true and complete and that I meet the specific residency and citizenship requirements of the office. I further certify that I shall meet the age requirements upon taking the oath of office, if appointed.			
Subscribed and sworn to before me this <u>26</u> day of <u>October</u> , 20 <u>15</u> .	X 		
	CANDIDATE'S SIGNATURE		
Signature of Notary Public	<u>907 2994 775</u>		
My commission expires: <u>2-14-17</u>	HOME PHONE - WORK PHONE - FAX NO.		
	In order to verify your voter registration status, please provide one of the following identifiers:		
	Social Security No.		
	Voter ID		
	Local (Optional)		
FOR OFFICE USE ONLY			
RECEIVED IN KPB CLERK'S OFFICE:	DATE: <u>10-27-15</u>	TIME: <u>8am</u>	BY: <u>Katie Ring</u>
VERIFIED: <u>10/28/15</u>	D/P: <u>31-300</u>	APPLICATION FORWARDED TO: <input checked="" type="checkbox"/> MAYOR'S OFFICE <u>10-28-15</u> <input checked="" type="checkbox"/> SERVICE AREA BOARD <u>10-28-15</u>	
SERVICE AREA BOARD: <u>10-21-15</u>	MAYOR: <u>10-28-15</u>	CONFIRMED BY ASSEMBLY: _____	
<input checked="" type="checkbox"/> RECOMMENDED APPOINTMENT <input type="checkbox"/> NOT RECOMMENDED	<input type="checkbox"/> RECOMMENDED APPOINTMENT <input type="checkbox"/> NOT RECOMMENDED	<input type="checkbox"/> LETTER MAILED TO APPLICANT: _____	

Return completed application to one of the following locations:

- Office of the Borough Clerk, 144 N. Binkley Street, Soldotna, AK 99669
- KPB Homer Annex Office, 206 E. Pioneer Street, Homer, AK 99603
- KPB Seward Annex Office, 302 Railway Ave., Suite 122, Seward, AK 99664