

2010 GROUP REGISTRATION



1.

Name (as it will appear on all communications):

A Better Choice ("ABC")
Post Office Box 23633
Ketchikan, Alaska 99901

For our records, please spell out acronyms. A group that spends 33 and 1/3 percent or more of its funds for one candidate **MUST** include the candidate's name as part of the group's name. If you are opposing a candidate you must indicate that in the group name.

Purpose:

To require that if the City of Ketchikan constructs a new public library, the library shall be located on City-owned property in the "downtown core" of the City which is defined as the area bordered by Front Street to the West, Mill Street and Totem Way to the South, Creek Street to the East, and the adjacent upland residential neighborhoods of Nob Hill to the North (ending at upper Main, Cedar, Pittinger and Pine Streets).

MAILING ADDRESS: Post Office Box 23633, Ketchikan, Alaska 99901

2. OFFICERS:

Chair: Mary Wanzer; 435 Hillcrest Road, Ketchikan, Alaska 99901

Phone: 907-225-2696 Email: marywanzer@pci.net

Treasurer: Diane Naab; Post Office Box 23633, Ketchikan, Alaska 99901

Phone: 907-617-9422 Email: dwnaab@gmail.com

{The treasurer must sign all campaign disclosure reports. Only the registered treasurer may receive or spend campaign funds on an on-going basis. Deputy Treasurers may only receive campaign Contributions}.

Deputy Treasurers: (Name and Address)

Len Laurance; 5716 South Tongass Highway, Ketchikan, Alaska 99901

Bill Rotecki; 359 Bunchberry Lane, Ketchikan, Alaska 99901

Susan Peters; 318 Mission Street, Ketchikan, Alaska 99901

3. CAMPAIGN PLANS: (Check all that apply) If your campaign plans change during the course of the year, update your registration immediately to avoid confusion and any potential fines.

Our group plans to spend money campaigning in the:

_____ 2010 State Election _____ Primary _____ General _____ Both

2010 Municipal Election in: **Special Election** Election Date: **Unknown**

_____ Our group does not plan to campaign in 2010, but will collect or expend money to influence 2011 elections, pay debts or administrative expenses. **Note:** The group must file a Year-End Report even if it only pays administrative costs or receives bank interest.

Disbanding: Our group will be disbanding during 2010. We have no plans to re-form and will be closing out our campaign account. Note: File a FINAL report within 10 days of closeout.

APOC FORM

(COMPLETE NEXT PAGE)

2010 Group Registration

Rev. 12/09

4. TYPE OF GROUP: (Identify all that apply)

MEMBER or EMPLOYEE PAC (Political Action Committee) associated with:

Name of Associated Organization: (e.g., ACME Corp., United Laborers, etc.)

Type of Associated Organization: Labor Trade Corporation

SPECIAL INTEREST GROUP

POLITICAL PARTY GROUPS

Central Party (Be sure to include a list of recognized subdivisions)

Recognized Subdivision (File own reports; however, subject to aggregate party limits)

X BALLOT MEASURE

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

Title and subject of the proposition:

X SPONSOR of an Initiative, recall, or referendum

Purpose of the petition: Amend City of Ketchikan Charter requiring the City of Ketchikan to use City owned property within a downtown location as the site for the new library.

CONTROLLED GROUP formed to support oppose a candidate.

"CANDIDATE-CONTROLLED" 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 draft one or more candidates)

5. CAMPAIGN BANK ACCOUNTS

If your group intends to raise or spend more than \$5000 during 2010, or is active in more than one election, you must provide the regulated banking institution that will serve as a campaign account depository:

NAME OF BANK LOCATION

6. CERTIFICATION: I certify that the information contained in this registration statement is true, complete, and correct.

DATE 5/20/10 TREASURER'S SIGNATURE [Signature]

UPDATE APOC AS YOUR PLANS CHANGE: If you are active in an election and do not report to APOC, you may accrue a large fine. Keep us updated so we can keep you updated. An informal note is all that is needed to amend this registration.

Please return to:

**ALASKA PUBLIC OFFICES COMMISSION
2221 E. NORTHERN LIGHTS, ROOM 128
ANCHORAGE, AK 99508-4149**

**PHONE: (907) 276-4176 or 800-478-4176
FAX: (907) 276-7018
www.apoc.alaska.gov**

PETITION FOR SUBMISSION TO VOTERS OF PROPOSED AMENDMENT TO THE CHARTER OF THE CITY OF KETCHIKAN

To the City Council of the City of Ketchikan:

We, the undersigned, registered and qualified voters of the State of Alaska, residents of the City of Ketchikan, pursuant to Section 1 of Article XI of the Alaska Constitution, Alaska Statute 29.10.030, Alaska Statute 29.26.100, and Section 13-1 of Article XIII of the Charter of the City of Ketchikan, Alaska, present this petition to the City Council and request that the following proposed amendment to the Charter of the City of Ketchikan, Alaska be submitted to the registered and qualified voters of the City for their adoption or rejection at an election on a date to be determined by the City Council.

The full text of the proposed charter amendment is available for public inspection at the City Clerk's Office, 334 Front Street, Ketchikan, Alaska 99901. A summary of the proposed charter amendment is as follows:

If the City constructs a new public library after the effective date hereof, the library shall be located on City-owned property in the Downtown of the City, which is defined as the area bordered by Grant Street to the North, Front Street to the West, Mill Street and Totem Way to the South, and Creek Street to the East, to Park Avenue, thence to Grant Street.

SIGNER'S OATH

"I swear (or affirm) that I know the contents and purpose of this petition and that I signed the petition only once and of my own free will."

All information must be filled in by the person(s) signing the petition unless disability prevents the person(s) from doing so. All information on this petition is subject to public inspection.

DATE	NAME	ADDRESS	DOB	SIGNATURE
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