

**DECLARATION OF CANDIDACY CORDOVA COMMUNITY
MEDICAL CENTER AUTHORITY BOARD OF DIRECTORS
CORDOVA, ALASKA
GENERAL ELECTION MARCH 7, 2023**

I, _____, declare that I meet the specific requirements to serve as a member of the Cordova Community Medical Center Authority Board of Directors. I declare myself a candidate for a Board member position, for the City election to be held in the City of Cordova, Alaska on the 7th day of March 2023.

I, _____, also declare that I qualify for the office for which I declare myself a candidate under any and all applicable ordinances in effect on the date this form is executed.

Name of Candidate (how it will be printed on ballot) Street Address

Mailing Address

Phone Number email address

Signature of Candidate

Subscribed and sworn to, before me, this _____ day of _____, _____.

Notary Public for the State of Alaska

My commission expires: _____