



# Directory of Shareholder-Owned Businesses & Services: Listing Form

- New Listing**     
  **Updated Listing**

The Directory is a listing of businesses and services owned and operated by Afognak Native Corporation Shareholders, descendants, and spouses. It is published annually to help promote these businesses and services. Our Afognak Alutiiq people have always been hard-working entrepreneurs, and we want to celebrate this legacy by helping to advertise the businesses that exist and services that are available.

## Business Owner/Service Provider Information

|   |            |   |       |  |          |
|---|------------|---|-------|--|----------|
| Last Name   |            | First Name  |       | Middle Initial   |          |
| Mailing Address   |            |   | City  | State  | Zip Code |
| Home Phone  | Cell Phone |   | Email |  |          |
| The above person is the:  |            |   |       |  |          |
| <input type="checkbox"/> Sole Business Owner  |            | <input type="checkbox"/> Partial Business Owner (percentage of ownership: ____) |       |  |          |
| <input type="checkbox"/> Primary Service Provider   |            |   |       |  |          |
| The above person is an:   |            |   |       | If descendant or spouse list related Shareholders name |          |
| <input type="checkbox"/> ANC Shareholder  |            | <input type="checkbox"/> ANC Descendant*  |       |  |          |
| <input type="checkbox"/> ANC Shareholder Spouse   |            |   |       |  |          |
| *Descendant is defined as a child, grandchild, or legally adopted child of an ANC Shareholder |            |   |       |  |          |

## Business/Service Information

|  |   |  |                              |                                 |          |
|--|---|--|------------------------------|---------------------------------|----------|
| Business/Service Name  |   | Primary Location where business/service operates |                              |                                 |          |
| Contact Name (if different than above)<br>State                    | Does the business have a state issued business license?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  | Business License Number and  |                                 |          |
| Special certifications held by the business (check all that apply) |   |  |                              |                                 |          |
| <input type="checkbox"/> 8(a)                                      | <input type="checkbox"/> SDVOB  | <input type="checkbox"/> WOB                     | <input type="checkbox"/> MOB | <input type="checkbox"/> Other: |          |
| Mailing Address  |   |  | City                         | State                           | Zip Code |
| Phone(s)   | Fax   | Website  |                              | Email                           |          |

***(Turn over to complete page 2 of the form)***

**Type of Business/Service Provided (check all that apply)**

|   |  |
|---|--|
| <input type="checkbox"/> Accountant               | <input type="checkbox"/> Communcations (PR, photography                                |
| <input type="checkbox"/> Aircraft Charter Service | <input type="checkbox"/> Guide Service (circle: hunting, fishing)                      |
| <input type="checkbox"/> Arts and Crafts          | <input type="checkbox"/> Janitorial  |
| <input type="checkbox"/> Automobile Services      | <input type="checkbox"/> Restaurant  |
| <input type="checkbox"/> Accommodations           | <input type="checkbox"/> Trade (circle: construction, welding, plumbing, other: _____) |
| <input type="checkbox"/> Boat Charter             | <input type="checkbox"/> Artist  |
| <input type="checkbox"/> Caterer                  |  |
| <input type="checkbox"/> Other:                   |  |

---

**Brief description of business or service provided or the type of artwork for sale (attach additional pages if necessary)**

---



---



---



---

Attach any promotional items you may have about your business or service (i.e. business cards, brochures).  
 If you are an artist, you may attach up to one photo of an example piece of artwork.

*Quyanaa* (thank you) for completing the Directory Shareholder-Owned Businesses and Services Listing Form! The Listing Form is **not** a contract for services, it is an internal tool provided to Afognak Native Corporation Shareholders, descendants, and spouses of Shareholders to help promote their businesses and services. Completing this form does not guarantee Afognak employees, vendors, or partners will utilize a business or service or purchase goods from your business or service. Program participants are responsible for keeping their listing current at all times by notifying Afognak Native Corporation of any changes to their business or service. Approximately once a year, Afognak Native Corporation will update the Shareholder Owned Business and Service Directory by contacting program participants directly. If a program participant does not respond to the inquiry, the listing will be dropped from the directory. **By signing this form you certify that the information reported herein is accurate and you authorize Afognak Native Corporation to distribute information about your business or service through its website, direct mail outs, and any other methods it deems necessary.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Return complete and signed form to Shareholder Services:**

Afognak Native Corporation  
 Attn: Shareholder Services  
 3909 Arctic Blvd, Suite 500  
 Anchorage, AK 99503  
 907-222-9501 fax  
 907-222-9500 phone  
 shareholderservices@afognak.com