

MATANUSKA-SUSITNA BOROUGH DIRECTORY OF ORGANIZATIONS

Emergency Medical Services Board

Board Expiration

<input type="text" value="Van Nice"/>	<input type="text" value="Jalan"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Butte Ambulance"/>
Company Representing				Term <input type="text" value="3/20/2012"/> to <input type="text" value="12/31/2018"/>
<input type="text" value="3805 N Vista Circle"/>			Type of Term	<input type="text" value="2"/> Full & Partial
<input type="text" value="Palmer"/>	<input type="text" value="AK"/>	<input type="text" value="99645"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 746-2491"/>	Work <input type="text" value="(907) 982-6916"/>	Cell <input type="text"/>	E-mail	<input type="text" value="jalan.vannice@matsugov.us"/>

<input type="text" value="Loscar"/>	<input type="text" value="Christopher"/>	<input type="text" value="J"/>	Board Position	<input type="text" value="EMS Butte Ambulance Alternate"/>
Company Representing				Term <input type="text" value="5/16/2017"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="PO Box 1189"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Palmer"/>	<input type="text" value="AK"/>	<input type="text" value="99645"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 746-0670"/>	Work <input type="text" value="(907) 390-0420"/>	Cell <input type="text"/>	E-mail	<input type="text" value="closcar2054@gmail.com"/>

<input type="text" value="Williamson"/>	<input type="text" value="Scott"/>	<input type="text" value="B"/>	Board Position	<input type="text" value="EMS Central Ambulance"/>
Company Representing				Term <input type="text" value="12/15/2015"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="PO Box 879250"/>			Type of Term	<input type="text" value="1"/> Full & Partial
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99687"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 830-4940"/>	Work <input type="text" value="(907) 861-8322"/>	Cell <input type="text"/>	E-mail	<input type="text" value="scott.williamson@matsugov.us"/>

<input type="text" value="Wallace"/>	<input type="text" value="Dane"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Central Ambulance Alternate"/>
Company Representing				Term <input type="text" value="11/7/2017"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="2872 N Woodfield Dr"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99654"/>	Member Title	<input type="text"/>
Home <input type="text" value="(919) 649-0056"/>	Work <input type="text" value="(907) 746-9329"/>	Cell <input type="text"/>	E-mail	<input type="text" value="dwallace@alaska.edu"/>

<input type="text" value="vacancy"/>	<input type="text"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Dispatch Center Alternate"/>
Company Representing				Term <input type="text"/> to <input type="text" value="12/31/2018"/>
<input type="text"/>			Type of Term	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member Title	<input type="text"/>
Home <input type="text"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail	<input type="text"/>

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<input type="text" value="vacancy"/>	<input type="text"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Dispatch Center Representative"/>
Company Representing	<input type="text"/>		Term	<input type="text" value="12/31/2020"/>
<input type="text"/>			Type of Term	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member Title	<input type="text"/>
Home	<input type="text"/>	Work	<input type="text"/>	Cell
	<input type="text"/>		<input type="text"/>	E-mail
				<input type="text"/>

<input type="text" value="Hunsaker"/>	<input type="text" value="Sunshine"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Dive Rescue Team Alternate"/>
Company Representing	<input type="text"/>		Term	<input type="text" value="2/2/2016"/> to <input type="text" value="12/31/2018"/>
<input type="text" value="PO Box 876181"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99687"/>	Member Title	<input type="text"/>
Home	<input type="text" value="(907) 232-7627"/>	Work	<input type="text" value="(907) 746-9243"/>	Cell
				E-mail
				<input type="text" value="sunshinedays84@gmail.com"/>

<input type="text" value="Stehlik"/>	<input type="text" value="Suzanne"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Dive Rescue Team Representative"/>
Company Representing	<input type="text"/>		Term	<input type="text" value="1/26/2016"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="PO Box 2854"/>			Type of Term	<input type="text" value="1"/> Full & Partial
<input type="text" value="Palmer"/>	<input type="text" value="AK"/>	<input type="text" value="99645"/>	Member Title	<input type="text"/>
Home	<input type="text"/>	Work	<input type="text" value="(907) 631-8020"/>	Cell
				E-mail
				<input type="text" value="suzanne.stehlik@matsugov.us"/>

<input type="text" value="Eyraud"/>	<input type="text" value="Nancy"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Hospital Alternate"/>
Company Representing	<input type="text"/>		Term	<input type="text" value="1/1/2016"/> to <input type="text" value="12/31/2018"/>
<input type="text" value="PO Box 877914"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99687"/>	Member Title	<input type="text"/>
Home	<input type="text" value="(907) 355-8406"/>	Work	<input type="text" value="(907) 861-6800"/>	Cell
				E-mail
				<input type="text" value="n.eyraud@msrhc.com"/>

<input type="text" value="Cook"/>	<input type="text" value="Pam"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Hospital Representative"/>
Company Representing	<input type="text"/>		Term	<input type="text" value="8/2/2016"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="1480 E Inverness Drive"/>			Type of Term	<input type="text" value="1"/> Full & Partial
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99654"/>	Member Title	<input type="text"/>
Home	<input type="text" value="(907) 357-7983"/>	Work	<input type="text" value="(907) 861-6853"/>	Cell
				E-mail
				<input type="text" value="cnpcook@mtaonline.net"/>

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Board Expiration

<input type="text" value="Check"/>	<input type="text" value="Thomas"/>		Board Position	<input type="text" value="EMS Medical Director"/>
Company Representing	<input type="text"/>			Term <input type="text" value="1/1/2016"/> to <input type="text" value="12/31/2018"/>
<input type="text" value="4380 E Crane Rd"/>				Type of Term <input type="text" value="1"/> <input type="text" value="Full"/>
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99654"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 414-3019"/>	Work <input type="text" value="(907) 861-6620"/>	Cell <input type="text"/>	E-mail <input type="text" value="maximumak700@hotmail.com"/>	

<input type="text" value="vacancy"/>			Board Position	<input type="text" value="EMS Medical Director Alternate"/>
Company Representing	<input type="text"/>			Term <input type="text"/> to <input type="text" value="12/31/2018"/>
<input type="text"/>				Type of Term <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member Title	<input type="text"/>
Home <input type="text"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail <input type="text"/>	

<input type="text" value="Durbin"/>	<input type="text" value="Nathan"/>		Board Position	<input type="text" value="EMS Palmer Ambulance"/>
Company Representing	<input type="text"/>			Term <input type="text" value="9/6/2016"/> to <input type="text" value="12/31/2017"/>
<input type="text" value="5010 W Mollies Circle"/>				Type of Term <input type="text" value="1"/> <input type="text" value="Partial"/>
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99623"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 982-9891"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail <input type="text" value="durbin_nathan24@hotmail.com"/>	

<input type="text" value="vacancy"/>			Board Position	<input type="text" value="EMS Palmer Ambulance Alternate"/>
Company Representing	<input type="text"/>			Term <input type="text"/> to <input type="text" value="12/31/2020"/>
<input type="text"/>				Type of Term <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member Title	<input type="text"/>
Home <input type="text"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail <input type="text"/>	

<input type="text" value="Day"/>	<input type="text" value="Cheri"/>		Board Position	<input type="text" value="EMS Sutton Ambulance"/>
Company Representing	<input type="text"/>			Term <input type="text" value="5/5/1998"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="P.O. Box 257"/>				Type of Term <input type="text" value="7"/> <input type="text" value="Full & Partial"/>
<input type="text" value="Sutton"/>	<input type="text" value="AK"/>	<input type="text" value="99674-0257"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 746-5981"/>	Work <input type="text"/>	Cell <input type="text" value="(907) 354-5549"/>	E-mail <input type="text" value="jcdlay@mtaonline.net"/>	

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Cote	Rachel		Board Position	EMS Sutton Ambulance Alternate			
Company Representing			Term	12/15/2015 to 12/31/2019			
17701 W Glenn Hwy			Type of Term	1 Full & Partial			
Sutton	AK	99674	Member Title				
Home	(907) 746-6720	Work	(907) 745-5121	Cell	(907) 414-9191	E-mail	ryanrachelcote@yahoo.com

vacancy			Board Position	EMS Talkeetna Ambulance			
Company Representing			Term	to 12/31/2020			
			Type of Term				
			Member Title				
Home		Work		Cell		E-mail	

vacancy			Board Position	EMS Talkeetna Ambulance Alternate			
Company Representing			Term	to 12/31/2018			
			Type of Term				
			Member Title				
Home		Work		Cell		E-mail	

Starbuck	Carol		Board Position	EMS Trapper Creek Ambulance			
Company Representing			Term	9/5/2017 to 12/31/2018			
PO Box 13302			Type of Term	1 Partial			
Trapper Creek	AK	99683	Member Title				
Home	(907) 733-0387	Work	(907) 232-0387	Cell		E-mail	carol.starbuck@matsugov.us

vacancy			Board Position	EMS Trapper Creek Ambulance Alternate			
Company Representing			Term	to 12/31/2020			
			Type of Term				
			Member Title				
Home		Work		Cell		E-mail	

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Board Expiration

<input type="text" value="Calvert"/>	<input type="text" value="David"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Uniformed or Responder Fire Service Alternate"/>
Company Representing <input type="text"/>			Term	<input type="text" value="1/12/2016"/> to <input type="text" value="12/31/2018"/>
<input type="text" value="13730 E Jersey Loop"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Palmer"/>	<input type="text" value="AK"/>	<input type="text" value="99645"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 707-9197"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail	<input type="text" value="david.calvert@matsugov.us"/>

<input type="text" value="Johnston"/>	<input type="text" value="Russell"/>	<input type="text" value="Paul"/>	Board Position	<input type="text" value="EMS Uniformed or Responder Fire Service Rep"/>
Company Representing <input type="text"/>			Term	<input type="text" value="8/1/2017"/> to <input type="text" value="12/31/2020"/>
<input type="text" value="PO Box 4"/>			Type of Term	<input type="text" value="1"/> Full & Partial
<input type="text" value="Willow"/>	<input type="text" value="AK"/>	<input type="text" value="99688"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 414-3510"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail	<input type="text" value="russelljohnston@gmail.com"/>

<input type="text" value="vacancy"/>	<input type="text"/>	<input type="text"/>	Board Position	<input type="text" value="EMS West Lakes Ambulance"/>
Company Representing <input type="text"/>			Term	<input type="text"/> to <input type="text" value="12/31/2019"/>
<input type="text"/>			Type of Term	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member Title	<input type="text"/>
Home <input type="text"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail	<input type="text"/>

<input type="text" value="Sprenger"/>	<input type="text" value="Dustin"/>	<input type="text"/>	Board Position	<input type="text" value="EMS West Lakes Ambulance Alternate"/>
Company Representing <input type="text"/>			Term	<input type="text" value="1/1/2017"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="PO Box 874766"/>			Type of Term	<input type="text" value="1"/> Full
<input type="text" value="Wasilla"/>	<input type="text" value="AK"/>	<input type="text" value="99687"/>	Member Title	<input type="text"/>
Home <input type="text" value="(701) 426-3182"/>	Work <input type="text"/>	Cell <input type="text"/>	E-mail	<input type="text" value="dustin.sprenger@matsugov.us"/>

<input type="text" value="Cunnington"/>	<input type="text" value="Ashley"/>	<input type="text"/>	Board Position	<input type="text" value="EMS Willow Ambulance"/>
Company Representing <input type="text"/>			Term	<input type="text" value="12/15/2015"/> to <input type="text" value="12/31/2019"/>
<input type="text" value="PO Box 521519"/>			Type of Term	<input type="text" value="1"/> Full & Partial
<input type="text" value="Big Lake"/>	<input type="text" value="AK"/>	<input type="text" value="99652"/>	Member Title	<input type="text"/>
Home <input type="text" value="(907) 982-2021"/>	Work <input type="text" value="(907) 982-2021"/>	Cell <input type="text"/>	E-mail	<input type="text" value="ashley.cunnington@matsugov.us"/>

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Board Expiration

Spaulding	Deborah		Board Position	EMS Willow Ambulance Alternate	
Company Representing			Term	12/3/2013	to 12/31/2019
2538 N Backhaus St			Type of Term	2	Full & Partial
Wasilla	AK	99623	Member Title		
Home	(907) 892-3647	Work	(907) 355-3460	Cell	
				E-mail	deb.spaulding@matsugov.us

Information Contact	Emergency Services
Total Board Members	13 members; 13 alternates
Meeting Schedule	1st Wednesday of each month, 7pm, (Please check the Notice of Public Meetings schedule at: www.matsugov.us/publicmeetings for meeting information.)
Meeting Location	Cottonwood PSB
Board Notes	No term limits. 6/3/15 OR 15-079 amended membership by increasing alternate seats. 1/14/11-Houston Amb&Alt seats were dissolved, Houston is being represented by the West Lakes positions.