

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-19: Creditors Affidavit

Why is this form needed?

This form must be completed by the <u>current holder</u> (transferor) of a marijuana establishment license in order to report all debts of and taxes owed by the business, as required by 3 AAC 306.045(b)(2). The Marijuana Control Board will deny an application for transfer of a license to another person if the Board finds that the transferor has not paid all debts or taxes arising from the operation of the licensed business, unless the transferor gives security for the payment of the debts or taxes satisfactory to the creditor or taxing authority, per 3 AAC 306.080(c)(2).

You must submit a completed copy of Form MJ-17c: License Transfer Application to each creditor listed on this form. This form must be completed and submitted to AMCO's Anchorage office before any license transfer application will be considered complete.

Section 1 – Transferor Information

Enter information for the *current* licensee and licensed establishment. Licensee: License Number: License Type: Doing Business As: Premises Address: City: State: Alaska ZIP: Federal Tax ID # / EIN:

Section 2 - Debts and Taxes Owed

Enter information for each creditor or taxing authority to which debts or taxes are owed. If there are no debts or taxes owed by the business, write "None" in the first field. You will be required to correct this form if a response of "N/A" is written in any field. Attach additional pages or documentation as necessary.

Creditor / Taxing Authority	Current Valid Email or Mailing Address of Creditor	Amount Owed

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Section 3 – Transferor Certifications

Read each line below, and then sign your initials	in the box to the right of each s	tatement:	Initials
I certify that all debts of the business and all taxes information provided for each creditor is current.	the business owes are listed on	Page 1 of this form, and that	the contact
I certify that I have submitted a completed copy of Page 1 of this form.	of Form MJ-17c: License Transfe	r Application to each creditor	listed on
I hereby certify that I am the person herein named application, and I know the full content thereof. I other documents submitted are true and correct. response in this application, or any attachment, o or revoking a license/permit. I further understand an application and commit the crime of unsworn for the committee.	declare that all of the informati I understand that any falsificati r documents to support this app I that it is a Class A misdemeand	on contained herein, and evid on or misrepresentation of an dication, is sufficient grounds	lence or y item or for denying
Signature of transferor		Signature of Notary Public	
Printed name of transferor	Notary Publi	c in and for the State of	
		My commission expires:	
Subscribed	and sworn to before me this	day of	, 20