

# Notice of Violation

(3AAC 304.525)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: 08-08-18

License #/Type: #3218 Package Store

Licensee: Carr-Gottstein Foods Co.

Address: 10576 Kenai Spur Hwy., Kenai, AK 99611

DBA: Oaken Keg #1808

AMCO Case #: AB 18-000931

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

During an inspection on 7-6-18 it was found Sales Clerk Teresa Matranga did not have a current copy of Server Education with her or a copy on file. She contacted the Liquor Store Manager, Rachel Stone-Ewing, whom advised the copies of all employees Server Education Cards had been misplaced during their move on May 31, 2018 and had not been seen since. The Safeway Assistant Store Manager, Jennifer Moore, was contacted and able to produce a copy of her Server Education Card. Moore took over sales in the liquor store. Moore later was able to obtain copies of the other employee's Server Cards and forward them via email to myself, Investigator Stonecipher. Notice of Violation issued for the lack of Server Education Cards since May 31, 2018.

This is a violation of AS 04.21.025 Alcohol server education course.

**You are directed to respond in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a re-occurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.**

**\*Please send your response to the address below and include your alcohol license number in your response.**

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

**Alcohol & Marijuana Control Office**

**ATTN: Enforcement**

**550 W. 7<sup>th</sup> Ave, Suite 1600**

**Anchorage, Alaska 99501**

**[amco.enforcement@alaska.gov](mailto:amco.enforcement@alaska.gov)**

Issuing Investigator: A. Stonecipher

Received by:

SIGNATURE:



SIGNATURE:

Delivered VIA: Email

Date:

Hello Keri,

I am only able to locate four participants for the list you sent me. Are these the correct spelling of each participant?

Vicky Hart  
Hala Allam  
David Dipola  
Austin Painter

Regards,

Carlos Palacios  
Account Manager  
1501 Wilson Blvd  
Suite 500  
Arlington, VA 22209-2414  
Phone: 1.800.438.8477 x309  
Email: [palaciosc@gettips.com](mailto:palaciosc@gettips.com)

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**From:** Keri Rochon [<mailto:Keri.Rochon@albertsons.com>]  
**Sent:** Friday, July 6, 2018 4:13 PM  
**To:** Carlos Palacios  
**Cc:** Store 1808 c90 - Store Manager; Joe Rybak  
**Subject:** Proof of training

Carlos –

As per our conversation – could you please provide the elec copy of training for the following:

Rachel Stone- Ewing  
Vicky Hart  
Philip Blythe  
Felicity Amend  
Hala Allam  
David Dipola  
Austin Painter  
Will Nejera

Either myself 40612 OR David Hunter would more than likely be the trainer. I believe that a few of these at least recently went thru a class where I might not even have the updated card?



Alaska Alcoholic Beverage Control Board

Package Store License

**Form AB-17b: 2019/2020 Renewal License Application**

**What is this form?**

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing package store liquor license that will expire on December 31, 2018. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only should be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcohol & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

**Section 1 – Establishment and Contact Information**

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Licensee:	Carr-Gottstein Foods Co.	License #:	3218
License Type:	Package Store	Statute:	AS 04.11.150
Doing Business As:	Oaken Keg #1808		
Premises Address:	10576 Kenai Spur Hwy		
Local Governing Body:	City of Kenai (Kenai Peninsula Borough)		
Community Council:	None		

Mailing Address:	PO BOX 29096 MS 6531		
City:	PHOENIX	State:	AZ
		ZIP:	85038-9096

Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual **must be a licensee** who is required to be listed in and authorized to sign this application.

Contact Licensee:	ROBERT GORDON	Contact Phone:	208-395-3856
Contact Email:	ROBERT.GORDON@SAFEWAY.COM		

**Optional:** If you wish for AMCO staff to communicate with individual who is **not a licensee** named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below.

Name of Contact:	NASC TAX	Contact Phone:	623-869-3573
Contact Email:	NASC.TAX@SAFEWAY.COM		



# Form AB-17b: 2019/2020 Package Store Renewal License Application

## Section 2 – Entity or Community Ownership Information

This top subsection must be completed by any licensee that is a **corporation** or **LLC**. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). This number is neither your EIN/tax ID number, nor your business license number. You may view your entity's status or find your CBPL entity number by visiting the following site: <https://www.commerce.alaska.gov/cbp/main/search/entities>

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #:	10023528 (CARR-GOTTSTEIN FOODS CO.)
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You must ensure that you are able to certify the following statement before signing your initials in the box to the right: Initials

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL.

This subsection must be completed by any **community** or **entity**, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- If the applicant is a **corporation**, the following information must be completed for each *stockholder who owns 10% or more* of the stock in the corporation, and for each *president, vice-president, secretary, and managing officer*.
- If the applicant is a **limited liability organization**, the following information must be completed for each *member with an ownership interest of 10% or more*, and for each *manager*.
- If the applicant is a **partnership**, including a limited partnership, the following information must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

**Important Note:** The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application.

Name of Official:	PLEASE SEE ATTACHED OFFICERS LIST			
Title(s):	Phone:	% Owned:		
Mailing Address:				
City:	State:	ZIP:		

Name of Official:				
Title(s):	Phone:	% Owned:		
Mailing Address:				
City:	State:	ZIP:		

Name of Official:				
Title(s):	Phone:	% Owned:		
Mailing Address:				
City:	State:	ZIP:		

CARR-GOTTSEIN FOODS CO.

ENTITY #10023528

Officers List

Name of Official:	SSI-AK HOLDINGS, INC.
Title(s):	SHAREHOLDER
Mailing Address:	5918 STONERIDGE MALL ROAD, TAX DIVISION, PLEASANTON, CA 94588-3229
Phone:	925-467-3700
% Owned	100%

Name of Official:	ROBERT MILLER
Title(s):	PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

Name of Official:	ROBERT GORDON
Title(s):	DIRECTOR, SECRETARY, VICE PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

Name of Official:	LAURA DONALD
Title(s):	DIRECTOR, ASSISTANT SECRETARY, VICE PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

Name of Official:	GARY MORTON
Title(s):	TREASURER, VICE PRESIDENT
Mailing Address:	250 E PARKCENTER BLVD, BOISE, ID, 83706
Phone:	208-395-6200
% Owned	0%

AMCO  
JAN - 4 2019



# Form AB-17b: 2019/2020 Package Store Renewal License Application

## Section 3 – Sole Proprietor Ownership Information

This section must be completed by any licensee who directly holds the license as an **individual or multiple individuals** and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information. Entities should skip to Section 4. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an:  applicant  affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an:  applicant  affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

## Section 4 – Alcohol Server Education

Read the line below, and then sign your initials in the box to the right of the statement: \_\_\_\_\_ Initials

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as set forth in AS 04.21.025 and 3 AAC 304.465.

## Section 5 – License Operation

Check a single box for each calendar year that best describes how this liquor license was operated: \_\_\_\_\_ 2017 2018

The license was regularly operated continuously throughout each year.  2017  2018

The license was regularly operated during a specific season each year.  2017  2018

The license was only operated to meet the minimum requirement of 240 total hours each calendar year.  2017  2018  
*If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this application.*

The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both of the calendar years.  2017  2018  
*If this box is checked, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement, unless a complete copy of the form (including fees) has already been submitted for that year.*



# Form AB-17b: 2019/2020 Package Store Renewal License Application

## Section 6 - Written Orders

Written orders in calendar years 2019 and 2020: Yes No

Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2019 and/or 2020?  Yes  No

## Section 7 - Violations and Convictions

Applicant violations and convictions in calendar years 2017 and 2018: Yes No

Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2017 or 2018?  Yes  No

Has any person or entity named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local ordinance adopted under AS 04.21.010 in the calendar years 2017 or 2018?  Yes  No

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

## Section 8 - Certifications

Read each line below, and then sign your initials in the box to the right of each statement: Initials

I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.  Initials: rg

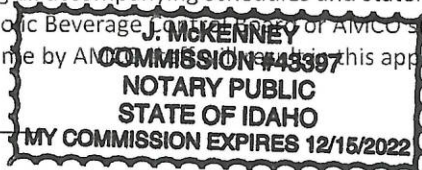
I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers, managers, general partners, or stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control (ABC) Board.  Initials: rg

I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.  Initials: rg

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Alcoholic Beverage Control Board or AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO will result in this application being returned to me as incomplete.

Robert A. Gordon

Signature of licensee



J. McKenney

Signature of Notary Public

Robert A. Gordon

Printed name of licensee

Notary Public in and for the State of Idaho

My commission expires: 12/15/22

Subscribed and sworn to before me this 2nd day of January, 2019.

Seasonal License? Yes  No

If "Yes", write your six-month operating period: \_\_\_\_\_

License Fee:	\$ 1500.00	Application Fee:	\$ 300.00	TOTAL:	\$ 1800.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					

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**ATTN: Enforcement**  
**550 W. 7<sup>th</sup> Ave, Suite 1600**  
**Anchorage, Alaska 99501**  
[amco.enforcement@alaska.gov](mailto:amco.enforcement@alaska.gov)



Issuing Investigator: A. Stonecipher

Received by:

SIGNATURE:

A handwritten signature in black ink, appearing to be "A. Stonecipher".

SIGNATURE:

Delivered VIA: Email

Date:



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Hala Allam  
David Dipola  
Austin Painter

Regards,

Carlos Palacios  
Account Manager  
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Suite 500  
Arlington, VA 22209-2414  
Phone: 1.800.438.8477 x309  
Email: [palaciosc@gettips.com](mailto:palaciosc@gettips.com)

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