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-09: Statement of Financial Interest

**What is this form?**

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

**This form must be completed and submitted to AMCO's main office by each proposed licensee before any license application will be considered complete.**

## Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

| | | | | | |
|---|---|---|---|---|---|
| **Licensee:** | Catalyst Retail, LLC | **License Number:** | 31418 | | |
| **License Type:** | Retail Marijuana Store | | | | |
| **Doing Business As:** | Catalyst Cannabis Company | | | | |
| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Samuel Miller |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Phone: 907.269.0350

Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record.
*The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Samuel Miller
Printed name of licensee

"Official Seal"
Notary Public
Nichole Bouchard
State of Alaska
Commission # 210125012 Expires 01/25/2025

Nichole Bouchard
Notary Public in and for the State of Alaska

My commission expires: 01/25/2025

Subscribed and sworn to before me this 2nd day of December, 2021.

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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Alaska Marijuana Control Board

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## Section 1 – Establishment Information

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | William Schneider |
| **Title:** | Member / Manager |
| [redacted] | |

AMCO
JAN 24 2022

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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Notary Public in and for the State of Alaska

SAMMY MIRANDA
My Commission Expires 6.8.25
NOTARY PUBLIC
STATE OF ALASKA

Printed name of licensee

My commission expires: 6.8.2025

Subscribed and sworn to before me this 6th day of December, 2021.

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Anchorage, AK 99501
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

**What is this form?**

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Keith Lopez |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

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**Alaska Marijuana Control Board**

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## Section 3 – Certifications

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Keith Lopez
Printed name of licensee

JOSE L. ROMERO II
My Commission Expires
NOTARY PUBLIC
Jul 22, 2023
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: JULY 22, 2023

Subscribed and sworn to before me this 1 day of December, 2021.

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | John Connolly |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

John Connolly
Printed name of licensee

MARCO PAULO C. ESPORLAS
NOTARY PUBLIC
STATE OF ALASKA
My Commission Expires: 08-15-25

Marco Paulo C. Esporlas
Notary Public in and for the State of Alaska

My commission expires: 08-15-2025

Subscribed and sworn to before me this 29th day of November, 2021.

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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**Alaska Marijuana Control Board**

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| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Andre Stoiber |
| **Title:** | Member |

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Notary Public in and for the State of Alaska

Andre Stoiber
Printed name of licensee

My commission expires: Aug 26, 2025

Subscribed and sworn to before me this 29th day of November, 2021.

MENG MOUA
Notary Public
State of Alaska
My Commission Expires Aug 26, 2025

AMCO
JAN 24 2022

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Alaska Marijuana Control Board

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Babette E Miller |
| **Title:** | Member |
| [redacted] | |

AMCC
JAN 24 2022

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Babette E. Miller
Printed name of licensee

JACOB ROMERO
My Commission Expires
NOTARY PUBLIC
Sep 28, 2024
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: 09/28/2024

Subscribed and sworn to before me this 9 day of December, 2021.

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Jonathan Hughes |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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**Alaska Marijuana Control Board**

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Notary Public in and for the State of Alaska

Jonathan Hughes
Printed name of licensee

My commission expires: 5-31-2023

Subscribed and sworn to before me this 14th day of December, 2021.

NOTARY PUBLIC
S. William Hagood
Comm. Exp. 5/31/2023

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

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| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Kyler Dunford |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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**Alaska Marijuana Control Board**

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Notary Public in and for the State of Alaska

Kyler Dunford
Printed name of licensee

My commission expires: 04/24/2023

Subscribed and sworn to before me this 14th day of December, 2021.

STATE OF ALASKA
NOTARY PUBLIC
Pauly Them
My Commission Expires: 04/24/2023

AMCO
JAN 24 2022

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| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Chad Reed |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Chad Reed
Signature of licensee

Chad Reed
Printed name of licensee

NOELANI N. PULU
Notary Public
State of Alaska
My Commission Expires Nov 28, 2024

Noelani N. Pulu
Notary Public in and for the State of Alaska

My commission expires: 11.28.2024

Subscribed and sworn to before me this 11th day of December, 2021.

AMCO
JAN 24 2022

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| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Kathleen Lawrence |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

Alcohol and Marijuana Control
Office 550 W 7th Avenue,
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907.269.0350

**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. *The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Karen L Cassel _____ Signature of licensee Notary Public in and for the State of Alaska

_____ My commission expires: 12/15/2022 Printed name of licensee

Subscribed and sworn to before me this 3 day of December, 2021.

Kathleen Lawrence
Kathleen Lawrence

STATE OF ALASKA
NOTARY PUBLIC
Karen L. Cassel
My Commission Expires: December 15, 2022

AMCO
JAN 24 2022

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-09: Statement of Financial Interest

**What is this form?**

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

**This form must be completed and submitted to AMCO's main office by each proposed licensee before any license application will be considered complete.**

## Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

| | | | | | |
|---|---|---|---|---|---|
| **Licensee:** | Catalyst Retail, LLC | **License Number:** | 31418 | | |
| **License Type:** | Retail Marijuana Store | | | | |
| **Doing Business As:** | Catalyst Cannabis Company | | | | |
| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Larry Greenstein |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

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**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Larry P Greenstein
Signature of licensee

Larry P Greenstein
Printed name of licensee

ALICIA G. SHOWALTER
My Commission Expires
NOTARY PUBLIC
Oct 4, 2026
STATE OF ALASKA

Alicia G. Showalter
Notary Public in and for the State of Alaska

My commission expires: Oct. 4, 2026

Subscribed and sworn to before me this 29th day of November, 2021.

AMCO
JAN 24 2022

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

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**This form must be completed and submitted to AMCO's main office by each proposed licensee before any license application will be considered complete.**

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| **Premises Address:** | 4707 Spenard Rd. | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99517 |

## Section 2 – Individual Information

Enter information for the individual licensee.

| | |
|---|---|
| **Name:** | Joe E Kaiser |
| **Title:** | Member |
| [redacted] | |

AMCO
JAN 24 2022

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*The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

JOE E. KAISER
Printed name of licensee

ALICIA G. SHOWALTER
My Commission Expires
NOTARY PUBLIC
Oct 4, 2026
STATE OF ALASKA

Alicia G. Showalter
Notary Public in and for the State of Alaska

My commission expires: Oct. 4, 2026

Subscribed and sworn to before me this 30th day of November, 2021.

AMCC
JAN 24 2022