



MEMORANDUM

TO: Bob Klein, Chair, and Members of the
Alcoholic Beverage Control Board

DATE: August 14, 2018

FROM: Erika McConnell, Director

RE: 54 American Legion Post #11

Requested Action: License renewal

Statutory Authority: AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

3 AAC 304.180. Denial, suspension, revocation, or refusal to renew or transfer, in the public interest: "(a) The factors the board will, in its discretion, consider in determining whether it is in the public interest to deny, revoke, suspend, or refuse to renew or transfer a license include

(1) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of commission of

(A) an act that constitutes a crime involving moral turpitude;

(B) a violation of AS 04 or regulations adopted by the board; a violation of the alcoholic beverage control laws of another state, as a licensee of that state; or

(C) a felony in this state, the United States, or another state or territory during the 10 years immediately preceding the date of application;

(2) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates are untrustworthy, unfit to conduct a licensed business, or a potential source of harm to the public;

Staff Rec.: Approve with delegation; bring to October meeting if not delegation not resolved

Background: At the June meeting, the board tabled consideration of this license renewal and asked the licensee to provide a written explanation of the criminal history of one of the club's officers and why it would be in the public interest for the board to approve the license renewal.

The club is in the process of changing officers to remove the individual with a criminal history. Should these changes not be completed by the October meeting, the board should address this with the licensee.

Attachment: Renewal application



Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board
Form AB-17: 2018/2019 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 liquor license that will expire on December 31, 2017. 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.

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:	Dorman H Baker Post #11	License #:	54
License Type:	Club	Statute:	AS 04.11.110
Doing Business As:	American Legion Post #11		
Premises Address:	129 1st Avenue, FAIRBANKS, AK 99701		
Local Governing Body:	City of Fairbanks (Fairbanks North Star Borough)		
Community Council:	None		

Mailing Address:	129 129 FIRST AVENUE		
City:	FAIRBANKS	State:	AK
		ZIP:	99701

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.

Point of Contact:	Walter E. Crary		
Contact Phone:	907-322-6834	Business Phone:	907-452-2228
Contact Email:	waltercrary@gmail.com		

Seasonal License? Yes No
 If "Yes", write your six-month operating period: _____

[Form AB-17] (rev 10/15/2017)
 License #54 DBA American Legion Post #11





Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2018/2019 Renewal License Application

Section 2 - Authorization

Communication with AMCO staff:

Yes No

Does any person other than a licensee named in this application have authority to discuss this license with AMCO staff?

Cathy Griseto 907-978-4748
 If "Yes", disclose the name of the individual and the reason for this authorization:

~~Linda Martin, Bookkeeper~~ - In case there is any problem that will potentially hold up the renewal.

Section 3 - Sole Proprietor Ownership Information

This section must be completed by any sole proprietorship who is applying for license renewal. Entities should skip to Section 4. If more space is needed, please attach a separate sheet with the required information. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: applicant affiliate

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

This individual is an: applicant affiliate

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





Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board
Form AB-17: 2018/2019 Renewal License Application

Section 4 – Entity Ownership Information

This 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). 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>
 Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5.

Alaska CBPL Entity #:	598D
-----------------------	------

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. [Signature]

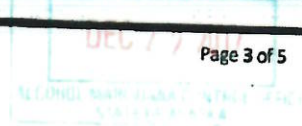
This subsection must be completed by any community or entity, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- 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.

Entity Official Name:	Walter E. Cray		
Title(s):	Commander/PRESIDENT	Phone:	907-322-6834
Mailing Address:	P.O. Box 71236		
City:	Fairbanks	State:	AK
		ZIP:	99707

Entity Official Name:	Billy M Smith		
Title(s):	Adjutant/Secretary	Phone:	907-520-1441
Mailing Address:	2817 Talkeetna Ave		
City:	Fairbanks	State:	AK
		ZIP:	99709

Entity Official Name:	Howard Majors, Jr.		
Title(s):	2nd Vice/VP	Phone:	907-388-3919
Mailing Address:	3279 Jefferson Drive		
City:	Fairbanks	State:	AK
		ZIP:	99709





Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board
Form AB-17: 2018/2019 Renewal License Application

Section 5 – License Operation

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

	2016	2017
The license was regularly operated continuously throughout each year, for 8 or more hours each day.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
The license was regularly operated during a specific season each year, for 8 or more hours each day.	<input type="checkbox"/>	<input type="checkbox"/>
The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>
The license was not operated at all or was not operated for at least the minimum requirement of 30 days each year, 8 hours each day, during one or both of the calendar years. <i>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.</i>	<input type="checkbox"/>	<input type="checkbox"/>

Section 6 – Violations and Convictions

Applicant violations and convictions in calendar years 2016 and 2017:

	Yes	No
Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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 2016 or 2017?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Section 7 – Alcohol Server Education

This section must be completed only by the holder of a beverage dispensary, club, or pub license or conditional contractor's permit. The holders of all other license types should skip to Section 8.

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

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 required under AS 04.21.025 and 3 AAC 304.465.

Initials





Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board
Form AB-17: 2018/2019 Renewal License Application

Section 8 – Certifications

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

- | | |
|---|---|
| I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application. | Initials
<div style="border: 1px solid black; padding: 2px;">LSM</div> |
| I certify 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. | <div style="border: 1px solid black; padding: 2px;">LSM</div> |
| 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 on file with the Alcoholic Beverage Control Board. | <div style="border: 1px solid black; padding: 2px;">LSM</div> |
| 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. | <div style="border: 1px solid black; padding: 2px;">LSM</div> |

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 in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me as incomplete.

Walter E. Cray
 Signature of licensee
Walter E. Cray
 Printed name of licensee

Amanda Murphree
 Signature of Notary Public
 Notary Public in and for the State of Alaska

NOTARY PUBLIC
 AMANDA MURPHREE
 STATE OF ALASKA
 My Commission Expires October 19, 2021

My commission expires: Oct. 19, 2021

Subscribed and sworn to before me this 12 day of Dec, 2017.

License Fee:	\$ 1200.00	Application Fee:	\$ 200.00	TOTAL:	\$ 1400.00
Late Fee of \$500.00 – if received or postmarked after 01/02/2018:					
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					\$ 1400.00





Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the **applicant** and the applicant's **spouse**.
- If the applicant is a **corporation**, this form 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**, this form 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**, this form must be completed for each **partner with an interest of 10% or more**, and for each **general partner**.

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

Section 1 - Establishment Information

Enter information for licensed establishment.

Licensee:	DORMAN # BAKER POST #11		
License Type:	BAR Club	License Number:	54
Doing Business As:	The American Legion, DORMAN # BAKER POST #11		
Premises Address:	129 FIRST AVENUE		
City:	FAIRBANKS	State:	AK
		ZIP:	99701

Section 2 - Individual Information

Enter information for the individual licensee or affiliate.

Name:	HOWARD MAJORS JR
Title:	2nd Vice Commander (VP)
Date of Birth:	08-30-1959





Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **never** been convicted of an act that constitutes a crime involving moral turpitude.

[Handwritten initials]

I certify that I have **never** been convicted of a violation of AS 04 or regulations adopted by the ABC Board.

[Handwritten initials]

I certify that I have **never** been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.

[Handwritten initials]

I certify that I have **not** been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 10 years immediately preceding the date of this form.

[Handwritten initials]

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

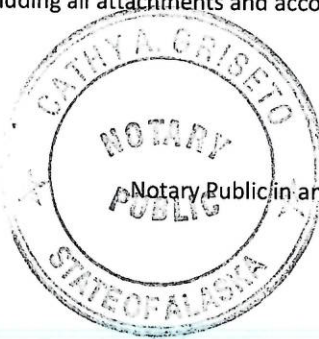
I **have been convicted** of one or more of the above offenses, and I **have attached a written explanation** that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.

[Handwritten initials]

I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. 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 perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

[Handwritten Signature]
Signature of licensee/affiliate



[Handwritten Signature]
Signature of Notary Public

HOWARD MAJORS JR
Printed name of licensee/affiliate

Notary Public in and for the State of ALASKA

My commission expires: 4/11/19

Subscribed and sworn to before me this 8 day of JANUARY, 2018.



Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the *applicant* and the applicant's *spouse*.
- If the applicant is a **corporation**, this form 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**, this form 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**, this form must be completed for each *partner with an interest of 10% or more*, and for each *general partner*.

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

Section 1 – Establishment Information

Enter information for licensed establishment.

Licensee:	Dorman H Baker Post #11				
License Type:	BAR Club	License Number:	54		
Doing Business As:	The American Legion, Dorman H. BAKER POST #11				
Premises Address:	129 FIRST AVENUE				
City:	FAIRBANKS	State:	AK	ZIP:	99701

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Billy M Smith
Title:	POST Adjutant (Secretary)
Date of Birth:	05/28/1957





Alaska Alcoholic Beverage Control Board

Form AB-08a: Authorization of Records Release

Section 3 – Certifications and Approvals

Read each line below, and then sign your initials in the box to the right of any applicable statements:

Initials

I certify that I have **never** been convicted of an act that constitutes a crime involving moral turpitude.

BMS

I certify that I have **never** been convicted of a violation of AS 04 or regulations adopted by the ABC Board.

BMS

I certify that I have **never** been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.

BMS

I certify that I have **not** been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 10 years immediately preceding the date of this form.

BMS

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:

Initials

I **have been convicted** of one or more of the above offenses, and I **have attached a written explanation** that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.

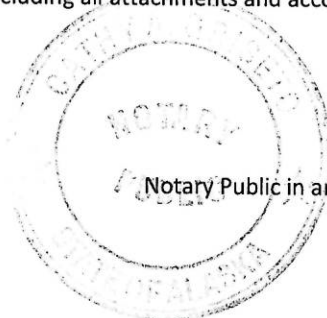


I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to the Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will 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 perjury that this form, including all attachments and accompanying schedules and statements, is true, correct, and complete.

Billy M Smith
Signature of licensee/affiliate

BILLY M SMITH
Printed name of licensee/affiliate



Cathy Agusta
Signature of Notary Public

Notary Public in and for the State of ALASKA

My commission expires: 4/11/19

Subscribed and sworn to before me this 8 day of JANUARY, 2018.

