



ALCOHOL AND MARIJUANA CONTROL OFFICE

550 West 7th Ave, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

		Klein, Chair, and Members of the bholic Beverage Control Board	DATE:	October 15, 2018
FROM:	Erik	a McConnell, Director	RE:	#3077 Panda Restaurant
Requested Action:	1	License reinstatement and renewal; transfer	of contro	lling interest
Statutory and Regulatory Authority:	y	AS 04.06.090(b): "The board shall review a this title and may order the director to issue licenses and permits authorized under this	e, renew, r	
		AS 04.11.040(a): "A license issued under the person except with the written consent of the second se		-
		3 AAC 304.160(e): "For the purposes of A failure to file a complete application for rer the required fees and penalty fees by that d request to reinstate the license if the reques (1) a complete application; (2) all required fees and penalty fees (3) proof of good cause for the failu	newal by F ate, the bo at is accom	ebruary 28 or for failure to pay ard will consider a written panied by
		3 AAC 304.160(f): "The board will deny a under (e) of this section if the board finds to caused by (1) the licensee's failure to notify the	hat the fai	lure to timely file or pay was
		mailing address; (2) a transfer of ownership of the b without written approval of the board in vi (3) a lease of the licensed business t	olation of	AS 04.11.040;
		04.11.450(c); or (4) any other action of the licensee finds constitutes a failure to lawfully operat issued."		
Staff Rec.:		Reinstate and renew; approve the transfer		

3077 Panda Restaurant ABC Board October 15, 2018 Page 2

Background: The licensee failed to file a complete renewal application, to include a complete transfer application, by the renewal deadline, so this license was expired. The owner has since submitted a complete renewal application, a request for reinstatement, and a complete transfer application.

The local government (Municipality of Anchorage) does not protest the renewal or transfer. Other reviewing entities have not objected.

Attachment: Request for reinstatement Renewal application Transfer application

3-14-2018	
RE: Alcohol	License

To whom it may concern,

We would like to clarify that we've submitted applications to renew our alcohol license at the office on December 19, 2017. We have waited about 2-3 months for the license. During this process we did not receive any notification through our email that we needed additional paper work, until we received a letter of license expiration from the office this March.

1,

We Just transfer 25% -> to another person it is asame and pandarestandare when changed Please send to 605 E Northernlight Bld Anchorage. AK. 99307. fand send to us email: Pancla 2008AKISA hotmail. rom thank you ! RECEIVED MAY 0.9 2018



Alaska Alcoholic Beverage Control Board Restaurant or Eating Place License Form AB-17a: 2018/2019 Renewal License Application

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

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing restaurant or eating place 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: Panda Restaurant Inc. License #: 3077 License Type: **Restaurant/Eating Place** Statute: AS 04.11.100 Spagma **Doing Business As:** Panda Restaurant Premises Address: 605 E Northern Lights Blvd Local Governing Body: Municipality of Anchorage **Community Council:** Midtown

Mailing Address: State: ZIP:

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

Point of Contact:	Jinson	a Zhad	
Contact Phone:	907-3/0-	915 Business Phone	·· 907-272-330K
Contact Email:	Panda 200	BakasA Chot	mail.com by mail
Yes Seasonal License?	Panda2003	rite your six-month operatir	ask com reperiod:
[Form AB-17a] (rev 10/16/201 License #3077 DBA Panda Rest	52	RECEIVED	DEC 1 9Page 1 of 5
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Alaska Alcoholic Beverage Control Board

Restaurant or Eating Place License Form AB-17a: 2018/2019 Renewal License Application

Communication with AMCO staff:	Yes	No
Does any person <u>other than</u> a licensee named in this application have authority to discuss this license with AMCO taff?		X
If "Yes", disclose the name of the individual and the reason for this authorization:		

Section 2 - Authorization

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 :		analterat
This individual i	san:	applicant

affiliate

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

This individual is an: applicant	affiliate	
Name:		
Mailing Address:		
City:	State:	ZIP:
Email:		
Contact Phone:		

[Form AB-17a] (rev 10/16/2017)	
License #3077 DBA Panda Restaurant	

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Alaska Alcoholic Beverage Control Board Restaurant or Eating Place License Form AB-17a: 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 vising the following site: <u>https://www.commerce.alaska.gov/cbp/main/search/entities</u> Partnerships may skip to the second half of this page. Sole proprietorships should skip to Section 5.

Alaska CBPL	Entity #:
-------------	-----------

You must ensure that you are able to certify the following statement before signing your initials in the box to the right:

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 <u>community</u> or <u>entity</u>, 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 <u>corporation</u>, 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 <u>limited liability organization</u>, 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 <u>partnership</u>, including a <u>limited partnership</u>, the following information must be completed for each partner with an interest of 10% or more, and for each general partner.

Entity Official Name:	JINSON	G Z	HAD			
Title(s):	President		Phone: 9	07-360-3915	% Owned:	15%
Mailing Address:	605 E Nor	themping	it Bl	id id		1.20
City:	Anchorage		state:	AK	ZIP: 9	9503
Г						
Entity Official Name:	YONGQ	T	CAO.	-7 Treasu	Yer	
Title(s):	Vice Presid	leare P	hone: 9	09-272-3306	% Owned:	12.5%
Mailing Address:	605 E X6	ortheral	right 1	elid		
City:	Anchorage.		tate:	AK	ZIP: 9	9502
			,			
Entity Official Name:	ZHIMIN	ZHI	A0 -	> Secres	tary	
Title(s):	De Managin	14 Hier	hone: 9	01-272-3300	% Owned:	12.5%
Mailing Address:	605 E	North	heral	ralt B	lvd	1
City:	Anchorage	> S	tate:	AK	ZIP: 9	9733
	00			REAL	DEC 1 0	2017
[Form AB-17a] (rev 10/16/2017		REC	EIVED	1 / CET	DEC	Page 3 of 5
License #3077 DBA Panda Resta	urant	MAY	09 2018	MAY 2 ALC	CHIER MADE JOHN	
				MARU W	18	
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Alaska Alcoholic Beverage Control Board Restaurant or Eating Place License Form AB-17a: 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.	M	
The license was regularly operated during a specific season each year, for 8 or more hours each day.	Õ	
The license was only operated to meet the minimum requirement of 30 days each year, 8 hours each day. 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 30 days each year, 8 hours each day, during one or both of the calendar years. 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.		
Section 6 – Violations and Convictions	Yes	No
lave any notices of violation (NOVs) been issued to this licensee in the calendar years 2016 or 2017?		X
las 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?		\square
f "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or co	nviction	s.
Section 7 – Alcohol Server Education		
Read the line below, and then sign your initials in the box to the right of the statement:		Initials
certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a pat have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of the ourse completion cards on the licensed premises during all working hours, as required under AS 04.21.025 and	tron	

[Form AB-17a] (rev 10/16/2017) License #3077 DBA Panda Restaurant RECEIVED

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Alaska Alcoholic Beverage Control Board

Restaurant or Eating Place License Form AB-17a: 2018/2019 Renewal License Application

Section 8 – Gross Receipts

Enter the dollar amounts of the food and gross (food + alcohol) receipts on the licensed premises, and calculate the percentage of gross receipts that are from food sales on the licensed premises for each calendar year. (Food Receipts + Gross Receipts x 100 = %)

2016 Food Receipts:	\$1241400	2016 Gross Receipts:	\$ 126000	% From Food:	-90 %	
2017 Food Receipts:	\$ 1310000	2017 Gross Receipts:	\$1323232	% From Food:	99 %	

Section 9 – 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.

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.

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.

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.

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 information being returned to meas incomplete.

Signature officensee	Thao	bscribed and sworn to b	Lotan Public in and	Signature of Notary P d for the State of My commission expire day of	usic Huska es: 03-29-21
License Fee:	\$ 600.00	Application Fee:	\$ 200.00	TOTAL:	\$ 800.00
Late Fee of \$500	0.00 – if received or	postmarked after 01,	/02/2018:		
Miscellaneous F	ees:				
GRAND TOTAL (i	f different than TO	TAL):			

[Form AB-17a] (rev 10/16/2017) License #3077 DBA Panda Restaurant

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

What is this form?

This transfer license application form is required for all individuals or entities seeking to apply for the transfer of ownership and/or location of an existing liquor license. Applicants should review **Title 04** of **Alaska Statutes** and **Chapter 304** of the **Alaska Administrative Code**. All fields of this form must be completed, per AS 04.11.260, AS 04.11.280, AS 04.11.290, and 3 AAC 304.105.

This form must be completed and submitted to AMCO's main office, along with all other required forms and documents, before any license application will be considered complete.

	Section 1 – Transferor Information
Enter information for the cu	rent licensee and licensed establishment.
Licensee:	Panda Restaurant Inc License #: 30117
License Type:	Restaurant / Eating Place Seasonal Statutory Reference: AS 04, 11, 100
Doing Business As: 7	Panda Restaurant
Premises Address:	605 E Northemlight Blid.
City:	Anchorage State: AK ZIP: 99503
Local Governing Body:	Municipality of Anchoraie.
	/ / / · · · · · · · · · · · · · · · · ·

Transfer Type: (



Regular transfer

Transfer with security interest

Involuntary retransfer

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		OFFICE USE ONLY	
Complete Date:	8/7/18	Transaction #:	82474
Board Meeting Date:		License Years:	19/19
Issue Date:		BRE:	(DC





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

	Section 2 -	Transferee Int	formation		
Enter information for the ne	w applicant and/or location s	seeking to be licensed.			
Licensee:	Panda Restau	7			
Doing Business As:	Ponda Des	tayesant.	٥		
Premises Address:	1 11	themlight	Blvd	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
City:	Anchorage	State:	AK	ZIP:	99503
Community Council:	Midtown		, , .		Ø
Mailing Address:	605 EN	sothernlight	Blud		
City:	Anchorage	State:	AK	ZIP:	99503
Designated Licensee:	(Jin) Pernela	Restauran	H Inc.	Tinso	no zha a
Contact Phone:	901-360-39	15 Business F		7-712	-3908
Contact Email:	Panda ? Dl	Rakusa	Dhot mail	, Cok	nI
Seasonal License?	Concert.	te your six-month op - Premises Info			case 1
Premises to be licensed is:	a new building	a proposed	d building		
The next two questions must	be completed by <u>beverage</u>	dispensary (including t	ourism) and <u>package sto</u>	<u>ore</u> applicar	its only:
What is the distance of th the outer boundaries of the	e shortest pedestrian route he nearest school grounds? I	from the public entran Include the unit of mea	ce of the building of you surement in your answ	ur proposed er.	l premises to
2 miles	North	hstar E	lementery.	Schoo)	L
What is the distance of the the public entrance of the <i>B miles</i>	e shortest pedestrian route nearest church building? In	from the public entran clude the unit of measu	Ce of the building of you prement in your answer	ur proposed	premises to
Form AB-01] (rev 10/10/2016)		RECEIVI			Page 2 of 7
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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

S	ection 4 – Sole Prop	rietor Ownership	Information
If more space is needed, plea The following information me	ted by any <u>sole proprietor</u> who ase attach a separate sheet with ust be completed for each licens pplicant affiliate	h the required information.	
Name:			
Address:			
City:		State:	ZIP:
E	pplicant affiliate		
Name:			
Address:			
City:		State:	ZIP:

Section 5 – Entity Ownership Information

This section must be completed by any <u>entity</u>, including a corporation, limited liability company (LLC), partnership, or limited partnership, that is applying for a license. Sole proprietors should skip to Section 6.

If more space is needed, please attach a separate sheet with the required information.

- If the applicant is a <u>corporation</u>, 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 <u>limited liability organization</u>, 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:	Jinsona Zh	() K			in the second
Title(s):	Presi dent	Phone:	901-212-3303 901-860-3915	% Ow	ned: 15%
Address:	605 E Konthembr	, /	2lucl		
City:	Anchorage.	State:	AK	ZIP:	99503

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Entity Official:	Yong Qi Cao				
Title(s):	Treasurer	Phone:	87-212-3308	% Own	ed: 12,50
Address:	605 E Norther	n list	c pho		10
City:	Anchorage	State:	AR	ZIP:	99503
			/		
Entity Official:	Zhimin Zhao				
Title(s):	Secretary	Phone:	907-272-3308	% Own	ed: 12.5%
Address:	605 E Northern	bickt	Blue		
City:	Anchererci	State:	AK	ZIP:	99508
Entity Official:					
Title(s):		Phone:	Phone: % Owned:		ed:
Address:		- I		Let	
City:		State:		ZIP:	

This subsection must be completed by any applicant that is a corporation or LLC. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations (DOC) and have a registered agent who is an individual resident of the state of Alaska.

			(~)		
DOC Entity #:	1000 5832	AK Formed Date:	06/26/20	P Home State:	AK
Registered Agent:	Tinsona	Zhao	Agent's Phone:	907-272	-3308
Agent's Mailing Address:	605 E	Northeral	icht Blu	rl	
City:	Anchorage	State:	AK	ZIP:	99507
	0				

Residency of Agent:

Yes No

Is your corporation or LLC's registered agent an individual resident of the state of Alaska?

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

ership and financial interest in other alcoholic beverage businesses:	Yes	No
Does any representative or owner named as a transferee in this application have any direct or indirect financial interest in any other alcoholic beverage business that does business in or is licensed in Alaska?		X
"Yes", disclose which individual(s) has the financial interest, what the type of business is, and if licensed cense number(s) and license type(s):	d in Alaska, whi	ch

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 8 – Transferor Certifications

Additional copies of this page may be attached, as needed, for the controlling interest of the current licensee to be represented.

I declare under penalty of perjury that the undersigned represents a **controlling interest** of the current licensee. I additionally certify that I, as the current licensee (either the sole proprietor or the controlling interest of the currently licensed entity) have examined this application, approve of the transfer of this license, and find the information on this application to be true, correct, and complete.

Signature of transferor

reiling 2hao

Printed name of transferor

Subscribed and sworn to before me this 23 day of APRTL , 2018.

Signature of Notary Public

NOTARY PUBLIC HEATHER M. FOOKS STATE OF ALASKA MY COMMISSION EXPIRES January 21, 2022

Notary Public in and for the State of ALASKA

My commission expires: JANNARY 21, 2022

Signature of transferor

Kyng Steams

Printed name of transferor

Subscribed and sworn to before me this 23^{Point} day of <u>APRTL</u>, 20<u>18</u>.

Utur M.

Signature of Notary Public

NOTARY PUBLIC HEATHER M. FOOKS STATE OF ALASKA MY COMMISSION EXPIRES January 21, 2022

Notary Public in and for the State of ALASKA

My commission expires: JANVARY 21,2622





Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

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

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

I certify 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.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

As an applicant for a liquor license, 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.

Signature of transferee

Printed name

[Form AB-01] (rev 10/10/2016)

Subscribed and sworn to before me this 23 day of APRTL

Josther Signature of Notary Public

NOTARY PUBLIC HEATHER M. FOOKS STATE OF ALASKA MY COMMISSION EXPIRES January 21, 2022

Notary Public in and for the State of ALASKA

My commission expires: JANUARY 21 2022

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Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

Read each line below, and then sign your initials in the box to the right of each statement:	Initials
I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.	Rta
I certify that all proposed licensees have been listed with the Division of Corporations.	Xti
I certify 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.	X to
I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.	R de
I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.	V H
As an applicant for a liquor license, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AA that this application, including all accompanying schedules and statements, is true, correct, and complete.	C 304, and

Signature of transferee

Jong Qi (ad

NOTARY PUBLIC HEATHER M. FOOKS STATE OF ALASKA

MY COMMISSION EXPIRES January 21, 2022

Printed name

Subscribed and sworn to before me this $23^{e^{o}}$ day of <u>APRTL</u>, 2010.

Heattin m. fr Signature of Notary Public

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Notary Public in and for the State of ______ALASKA

My commission expires: JANUARY 21, 2022





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

Alaska Alcoholic Beverage Control Board

Form AB-01: Transfer License Application

Section 9 – Transferee Certifications

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

I certify that all proposed licensees (as defined in AS 04.11.260) and affiliates have been listed on this application.

I certify that all proposed licensees have been listed with the Division of Corporations.

I certify 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.

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check the identification of a patron will complete an approved alcohol server education course, if required by AS 04.21.025, and, while selling or serving alcoholic beverages, will carry or have available to show a current course card or a photocopy of the card certifying completion of approved alcohol server education course, if required by 3 AAC 304.465.

I agree to provide all information required by the Alcoholic Beverage Control Board in support of this application.

As an applicant for a liquor license, 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.

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Signature of transferee

Printed name

Subscribed and sworn to before me this 23th day of APREL

Signature of Notary Public

NOTARY PUBLIC HEATHER M. FOOKS STATE OF ALASKA MY COMMISSION EXPIRES January 21, 2022

Notary Public in and for the State of ALASKA

My commission expires: JANUARY 21, 2022

[Form AB-01] (rev 10/10/2016)





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