



## MEMORANDUM

TO: Alcoholic Beverage Control Board

DATE: January 21, 2020

FROM: Glen Klinkhart, Interim Director

RE: 94 & 3658 BPO Elks Lodge  
#1842

**Requested  
Action:**

Appeal requirement to transfer or expire one of the two licenses and consideration of renewal applications.

**Statutory  
Authority:**

AS 04.11.560(a): "An action of an officer, employee, or agent of the board relating to the administration or enforcement of this title may be appealed to the board by the aggrieved party."

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."

**Staff Rec.:**

Uphold staff's determination to require expiration or the transfer of one license and approve the renewal of the remaining license with delegation.

**Background:** Our office received both renewal applications on October 16, 2019 and in the course of the examiner's review it was discovered that BPO Elks Lodge #1842 holds both a beverage dispensary and a club license at the same location.

The September 27, 1985 Attorney General's opinion states "We imagine that the board may be requiring forfeiture in part because it believes that licensed premise should have only one license issued to it. **We agree that it would be contrary to the general scheme of Title 04 to permit a licensee to actually operate under the authority of two separate licenses at a single licensed premises** and thus to prevent those licenses from becoming available to other premises."

On November 19, 2019 the previous Records and Licensing Supervision, Ms. Martin, notified the licensee in writing that per the above AG's opinion, two liquor licenses may not exist and operate in the same location. She then offers the following options to resolve the matter.

- One of the licenses can be transferred to another location.
  - This license can be transferred to your entity at a different location or
  - It could be transferred to another individual or group at a different location

- One of the licenses can be surrendered and expired (without renewal, both licenses will expire naturally on February 28<sup>th</sup>, 2020)

On December 11, 2019 our office received the licensee's request to appeal staff's decision.

Attachments: Licensee request  
Diagrams  
RLS Notification Letter  
Attorney General's Opinion  
94 & 3658 Renewal Applications



# *Palmer Elks Lodge #1842*

2600 N. Barry's Resort Drive, Wasilla, Alaska 99654 Phone (907) 745-3950 Fax (907) 361-3969  
Email: [palmerelks@yahoo.com](mailto:palmerelks@yahoo.com) Website: [www.palmerelks.org](http://www.palmerelks.org)

*A Fraternal Organization*

January 3, 2020

Alcohol & Marijuana Control Office  
Attn: Ms. Carrie Craig  
550 West 7<sup>th</sup> Avenue, Suite 1600  
Anchorage, Alaska 99502

RE: Liquor License Premises  
Beverage Dispensary License #94 &  
Club License #3658

Dear Ms. Craig,

Thank you for your email of December 12<sup>th</sup> acknowledging our licenses referenced above have been deemed complete and for confirmation of the schedule for our appeal of the requirement to transfer or expire one of the two licenses.

In my December 11<sup>th</sup> email, I requested copies of the premises diagrams on file for each of the licenses as well as a copy of the Attorney General's opinion cited in the original November 19<sup>th</sup> letter received from AMCO. I requested those items to try to get an understanding of what changed since we acquired Dispensary License #94 but, have yet to receive them.

Palmer Lodge has held both licenses for approximately 23 years without violation. During our review we discovered an error in our applications indicating that both licenses were used on a daily basis. This statement, while an oversight on our part, is erroneous. The Lodge has never operated both licenses at the same time. If Club License #3658 is used, there are no sales under Dispensary License #94 and vice versa. As to the same licensed premises space for each license, only one license is used on any given day. Therefore, the same licensed premises space diagram was submitted for each license.

The November 19<sup>th</sup> AMCO letter suggested several ways to resolve the issue:

- Surrender one license and let it expire.
- Transfer one license to another individual/group at a different Location.
- Transfer one license to ourselves at another location.

The first suggestion of surrender and letting expire is a total loss of compensation on an asset the Lodge has held for approximately 23 years. Suggestion 2, although possibly viable, would most likely take more time to find another individual/group and different location than the February 28<sup>th</sup> deadline would allow.

The optimum for Palmer Lodge would be to continue working as we have been under Club License #3658 and its current premises space diagram and using Dispensary License #94 in the same space diagram, as a minimum, the number of days required to keep it current and in good standing. Use of Dispensary License #94 in conjunction with facility rentals is a selling point for rentals and an income generator to help cover facility operations and maintenance costs. (See Option 1 licensed premises diagram drawings attached.)

Suggestion 3 may be a viable solution. I am aware of other instances where two licenses are in use at the same location and apparently in compliance with your Office, albeit in both cases, the premises space diagrams are different, i.e. different floors, different control points, etc. Some relatively simple building modifications on our part may be able to be made to provide access control and delineate the two different licensed premises areas to comply with the intent of your letter. I have attached Option 2 licensed premises diagram drawings with possible layouts for use of the two licenses for your review and discussion with the Alcoholic Beverage Control Board during the appeal.

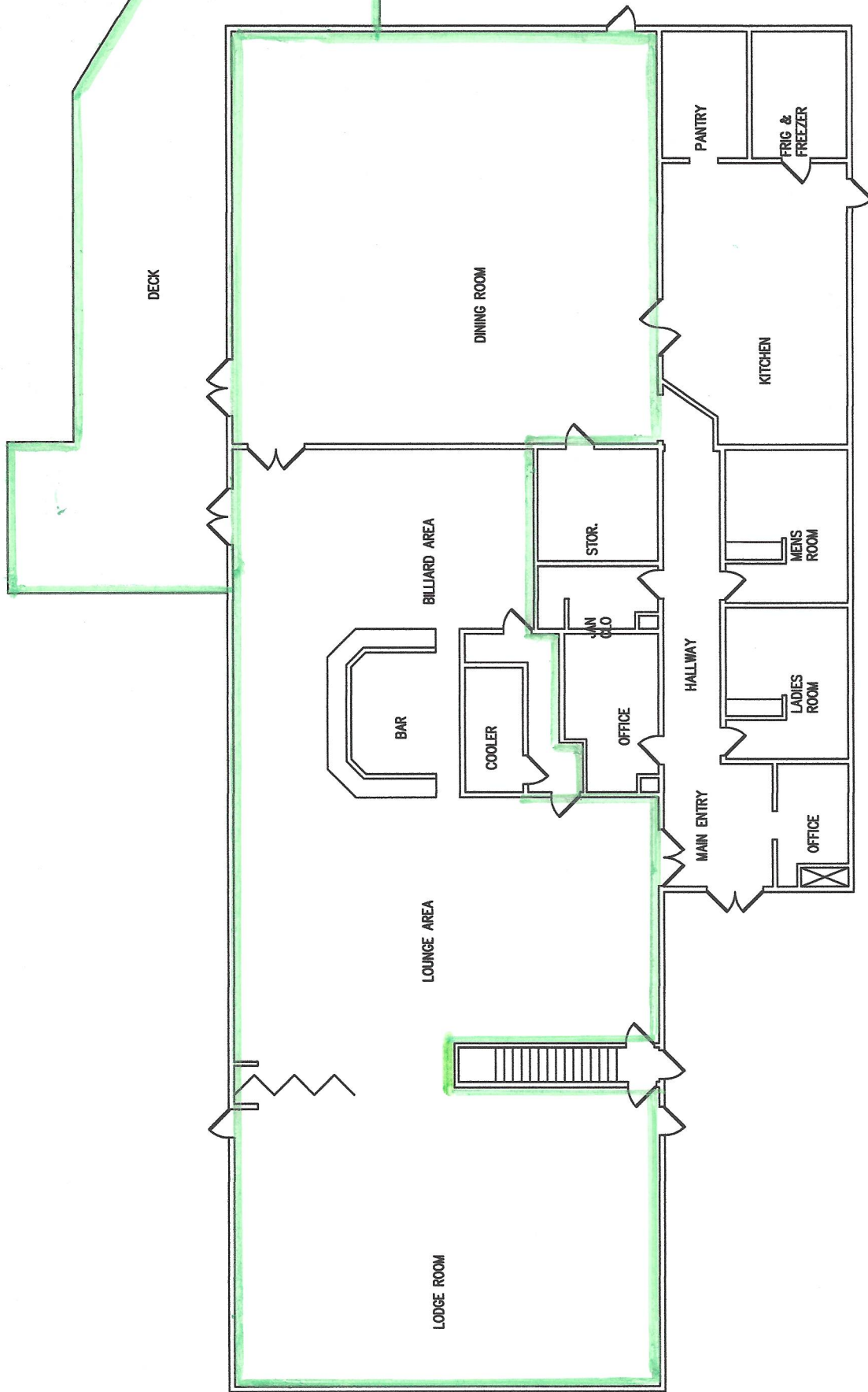
I look forward to working with you to resolve this issue.

Fraternally,

A handwritten signature in dark ink, appearing to read 'W. Michael Southcott', followed by a long, horizontal, wavy line that extends to the right.

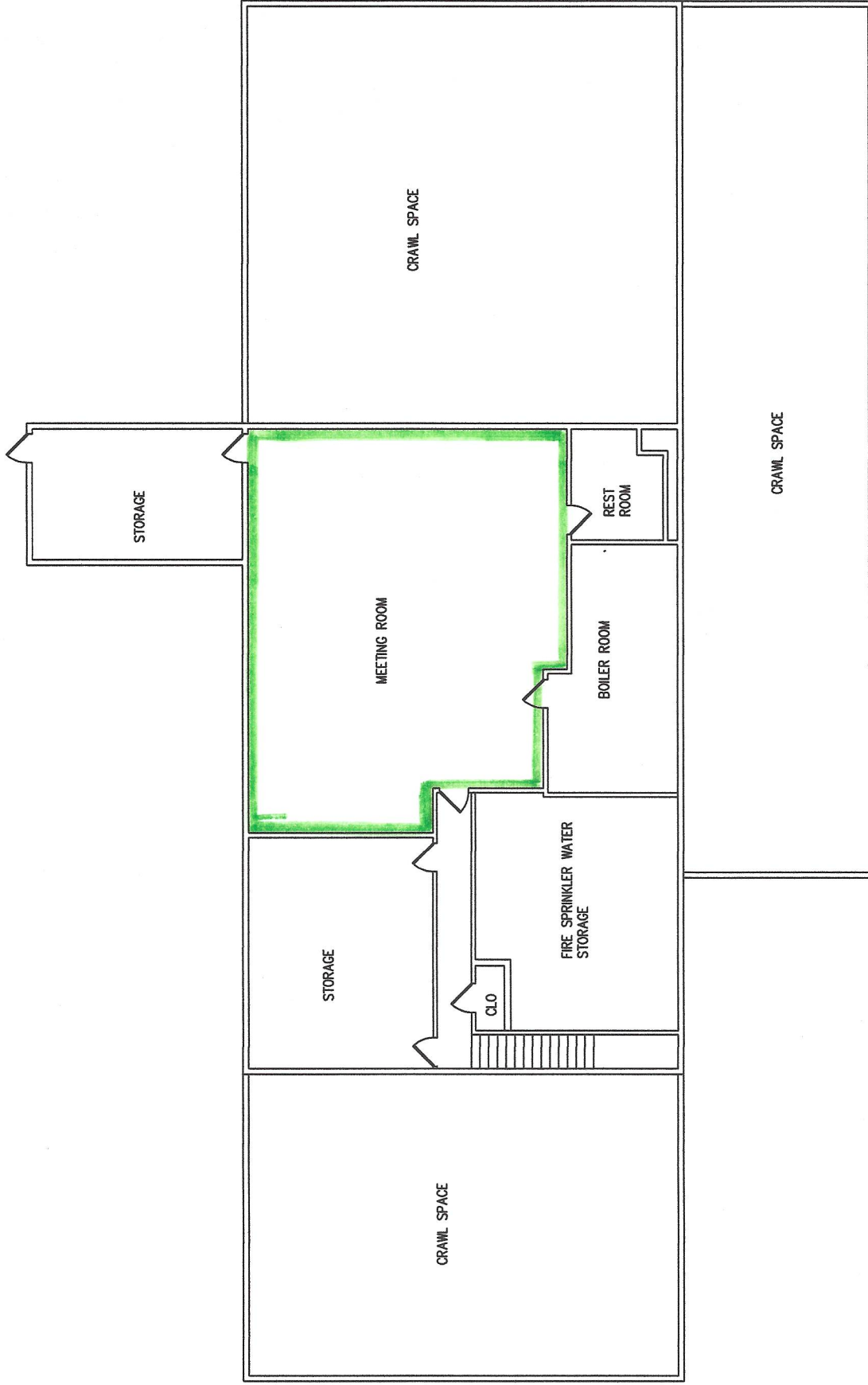
W. Michael Southcott, PER  
Palmer Elks Lodge #1842  
907-982-7301 Cell  
mmsouth@mtaonline.net





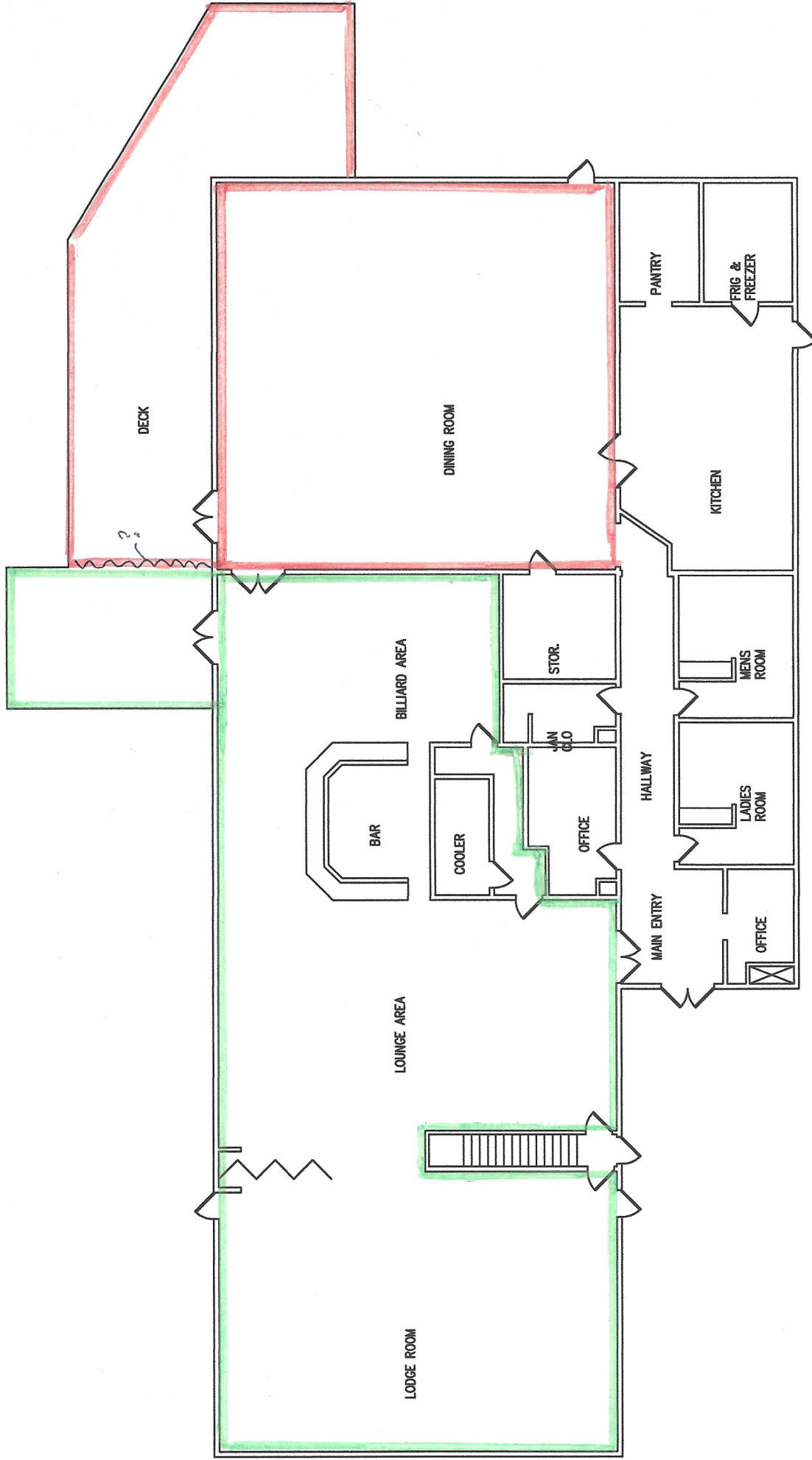
CLUB LICENSE #3658  
DISPENSARY LICENSE #94

LODGE MAIN LEVEL SCALE: 1/16" = 1'-0" = **OPTION 1**



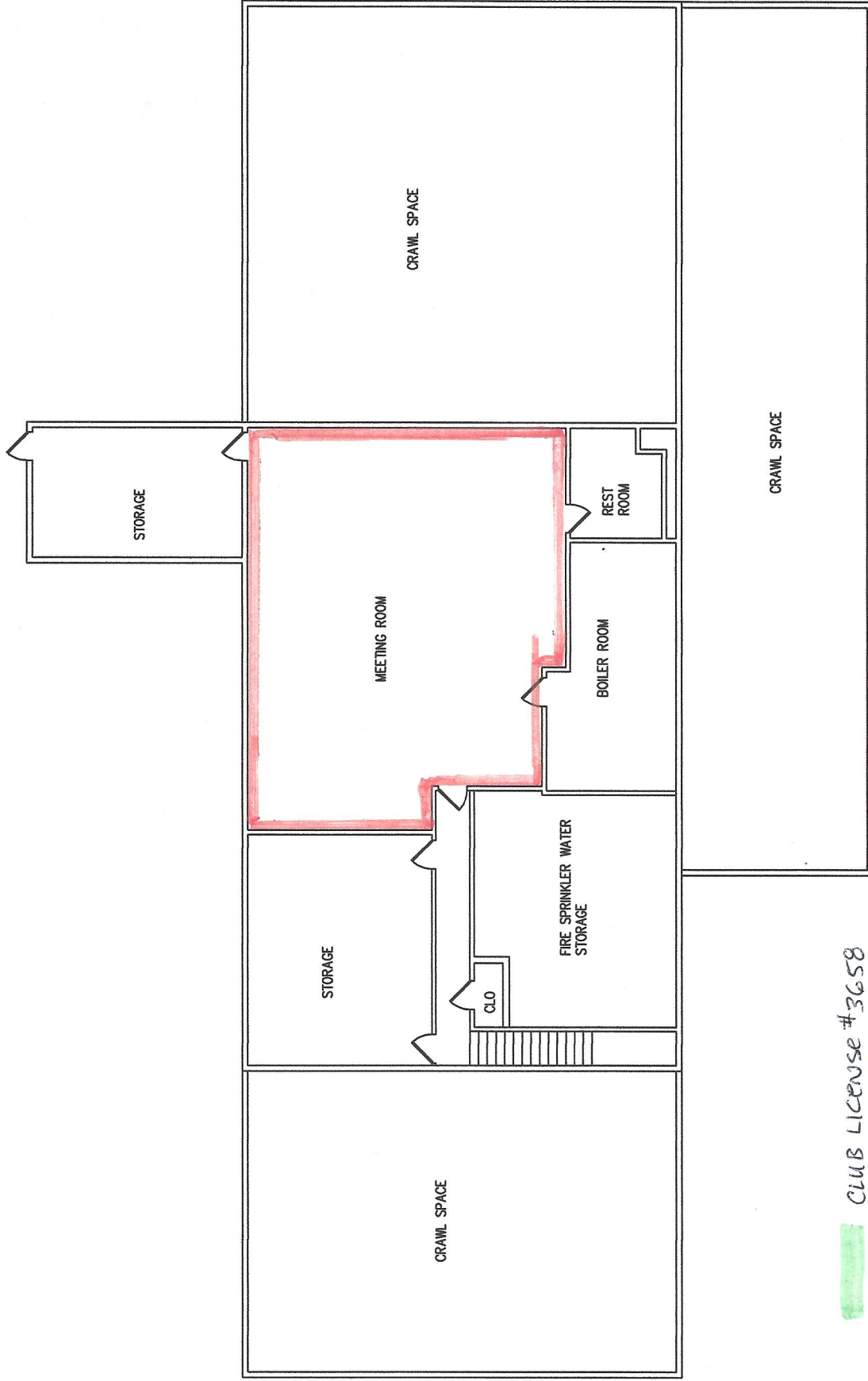
CLUB LICENSE #3650  
Dispensary license #94

BASEMENT LEVEL SCALE 1/16" = 1'-0" **OPTION 1**



CLUB LICENSE #3658  
DISPENSARY LICENSE #94

LODGE MAIN LEVEL SCALE: 1/16" = 1'-0" = **OPTION 2**



CLUB LICENSE #3658

DISPENSARY LICENSE #94

BASEMENT LEVEL SCALE 1/16" = 1'-0" **OPTION 2**

**From:** WILLIAM SOUTHCOTT  
**To:** [Alcohol Licensing, CED ABC \(CED sponsored\)](#)  
**Subject:** Re: 94 Application Completion Notice  
**Date:** Wednesday, December 11, 2019 12:18:34 PM

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Randi,

Thank you for your assistance last week regarding the two liquor licenses (Beverage Dispensary License #94 & Club License #3658) held by BPO Elks Lodge No. #1842. As stated during our conversation, Palmer Lodge has had these licenses since +/- 1996. To my knowledge, we have had them without violation since that time.

As requested, would you please provide a copy of the Attorney General's opinion that your November 19th letter references. In addition, would you also include copies of the premises diagrams for each of our licenses. I am aware of other instances where two licenses are in use at the same location and apparently in compliance with your Office. Assuming this is a matter of the premises diagrams for each license and access control to each of the delineated areas, it would seem to be a relatively easy issue for us to resolve and comply with the intent of your letter with a few changes to ours. We have never used both licenses at the same. It appears using one or the other license, but not both at the same time in the same delineated area, will no longer be acceptable.

My biggest concern is the timing of the letter and the amount of time available to remedy the situation. We have held the dispensary license for about 23 years without incident and now appear to be poised to lose the asset without cause on our part. I respectfully request a time extension for late fees, etc. while we work with AMCO to resolve this issue.

Fraternally,

Mike Southcott, PER  
Palmer Elks Lodge #1842  
(907) 982-7301 Cell  
[mmsouth@mtaonline.net](mailto:mmsouth@mtaonline.net)

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**From:** "alcohol licensing" <[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)>  
**To:** "Mike Southcott" <[mmsouth@mtaonline.net](mailto:mmsouth@mtaonline.net)>  
**Cc:** "alcohol licensing" <[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)>  
**Sent:** Monday, December 2, 2019 1:11:01 PM  
**Subject:** 94 Application Completion Notice

Good Afternoon:

This email is to inform you that your application for Liquor License #94 may be deemed complete once you have taken appropriate action on the letter attached.

Thanks,

*Randi Baker*  
Occupational Licensing Examiner  
Alcohol and Marijuana Control Office  
Phone: 907.269.0350

[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)  
[marijuana.licensing@alaska.gov](mailto:marijuana.licensing@alaska.gov)



Please consider the environment before printing this e-mail.

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THE STATE  
of **ALASKA**  
GOVERNOR MICHAEL J. DUNLEAVY

Department of Commerce, Community,  
and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE  
550 West 7<sup>th</sup> Avenue, Suite 1600  
Anchorage, AK 99501  
Main: 907.269.0350

November 19, 2019

BPO Elks Lodge #1842  
2600 Barry's Resort Road  
Wasilla, AK 99654

RE: Liquor License Premises, License #94 & #3658

Dear BPO Elks Lodge No. #1842:

It has come to my attention that BPO Elks Lodge No. #1842 holds two liquor licenses in the establishment located at 2600 Barry's Resort Road, Beverage Dispensary License #94 and Club License #3658. Upon review of the premises diagrams, these establishments also appear to have the same licensed premises space.

Per an opinion by the Attorney General, two liquor licenses may not exist and operate in the same location. You have several ways in which to resolve this matter.

- One of the licenses can be transferred to another location.
  - This license can be transferred to your entity at a different location or
  - You may transfer it to another individual or group at a different location
- One of the licenses can be surrendered and expired. (Without renewal, both licenses will be expiring naturally on February 28<sup>th</sup>, 2020.)

For your reference, the fees and rights of your licenses can be found at the following statutory references: AS 04.11.090. Beverage dispensary license and AS 04.11.110 Club license.

We will not be able to deem any renewal application for these licenses complete until such time as this matter is resolved. Please note that any application not completed by December 31, 2019 will be assessed the \$500 late fee and any application not completed by February 28, 2020 will be expired.

Please contact [alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov) or call 269-0350 with any questions regarding this matter.

A handwritten signature in black ink, appearing to read "Mikal Martin".

Mikal Martin  
Records and Licensing Supervisor  
Alcohol and Marijuana Control Office



that you simply return the licenses. A formal hearing will not cure the board's likely lack of authority to require forfeiture, and the hearing will thus likely result in a decision to return the licenses.<sup>4</sup>

\*4 While we have thus concluded that forfeiture is likely improper, we nonetheless believe the board may require the temporary surrender of an upgraded restaurant license pending its transfer or relocation. We imagine that the board may be requiring forfeiture in part because it believes that a licensed premise should have only one license issued to it. We agree that it would be contrary to the general scheme of Title 04 to permit a licensee to actually operate under the authority of two separate licenses at a single licensed premises, and thus to prevent those licenses from becoming available to other premises. We thus believe the board is authorized to require the temporary surrender—as opposed to the permanent forfeiture—of a restaurant license upon the licensee's receipt of a beverage dispensary license. The 30-day operation requirement of AS 04.11.330 will ensure that no license will remain dormant for an excessive period of time, and will provide a deadline by which the upgrading license must transfer or relocate the restaurant license.

As always, please advise us if we can be of any further assistance in this matter.

Harold M. Brown  
Attorney General  
Kay E. Maassen Gouwens  
Assistant Attorney General  
Commercial Section-Anchorage

#### Footnotes

- <sup>1</sup> The fact that the policy affects the licensees is important. Policies that relate strictly to internal management of the agency may be adopted without the formalities of the Administrative Procedures Act. Policies affecting the public (including licensees), however, may generally be implemented only by regulation. AS 44.62.640(a)(3).
- <sup>2</sup> Arguably, the board's authority to deny transfer where it "would not be in the best interests of the public" may save the policy from being deemed inconsistent with the statutes that generally permit transfer, if forfeiture promotes the public's best interests. AS 04.11.320(a)(1); AS 04.11.340(1); AS 04.11.360(1); AS 04.11.370(2). However, notice and opportunity for a hearing on the transfer denial would still seem to be mandated by AS 04.11.510(b). We address whether forfeiture may be said to promote the public interest below, where we discuss whether the regulation is "reasonably necessary to carry out the purposes of the statutory provisions" and "reasonable and not arbitrary."
- <sup>3</sup> Of course, the actual purpose of the 30-day operation requirement may be simply to ensure that the quota of licenses is not artificially low due to the nonoperation of any licensed businesses.
- <sup>4</sup> You have suggested that forfeiture may be permissible because a license is a "privilege," according to AS 04.11.660. However, we believe that the term "privilege," as we have discussed before, is nothing more than a way of stating that a licensee's interest in a license is not absolute—that it is restricted in one or more respects. Calling something a "privilege" does not mean that the holder of the privilege has no interest in the privilege that warrants protection, nor does it state anything about the transferability of the license. Numerous provisions of Title 04 make it clear that the holder of a license in fact has a protectable, albeit limited, property-type interest in the license. If this were not so, a licensee would not be entitled to a hearing before a suspension or revocation of a license, and the burden of proof would not be on the staff to demonstrate that an offense warranting revocation or suspension has occurred. AS 04.11.510. Particularly relevant to this matter is the fact that the Alaska statutes expressly provide that an alcoholic beverage license may be transferred, although the transfer of a license may be denied for various reasons stated in the statute. AS 04.11.290. The general and ill-defined statement that a license is a "privilege" does not negate the statute's specific provisions permitting a licensee to transfer his license.

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1985 WL 70223 (Alaska A.G.)

End of Document

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

Alaska Alcoholic Beverage Control Board

## Master Checklist: Renewal Liquor License Application

|                    |                          |                 |         |
|--------------------|--------------------------|-----------------|---------|
| Doing Business As: | BPO Elks Lodge No. #1842 | License Number: | 94      |
| License Type:      | Beverage Dispensary      |                 |         |
| Examiner:          | <i>RANDI</i>             | Transaction #:  | 1158976 |

| Document                   | Received | Completed    | Notes |
|----------------------------|----------|--------------|-------|
| AB-17: Renewal Application | 10/16    | <i>10/16</i> |       |
| App and License Fees       | 10/16    | <i>10/16</i> |       |

| Supplemental Document       | Received | Completed | Notes |
|-----------------------------|----------|-----------|-------|
| Tourism/Rec Site Statement  |          |           |       |
| AB-25: Supplier Cert (WS)   |          |           |       |
| AB-29: Waiver of Operation  |          |           |       |
| AB-30: Minimum Operation    |          |           |       |
| AB-33: Restaurant Affidavit |          |           |       |
| COI / COC / 5 Star          |          |           |       |
| FP Cards & Fees / AB-08a    |          |           |       |
| Late Fee                    |          |           |       |

|                    |  |
|--------------------|--|
| Names on FP Cards: |  |
|--------------------|--|

Yes No

Selling alcohol in response to written order (package stores)?

☒ ☒

Mailing address and contact information different than in database (if yes, update database)?

☒ ☐

In "Good Standing" with CBPL (skip this and next question for sole proprietor)?

☒ ☐

Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?

☒ ☐

LGB 1 Response:

LGB 2 Response:

☐ Waive ☐ Protest ☐ Lapsed

☐ Waive ☐ Protest ☐ Lapsed



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

Alaska Alcoholic Beverage Control Board

## Form AB-17: 2020/2021 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 are due to renew by December 31, 2019. 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 and submitted to AMCO's main office before any license renewal application will be reviewed. 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:             | BPO Elks Lodge No. #1842  | License #: | 94    |
| License Type:         | Beverage Dispensary       |            |       |
| Doing Business As:    | BPO Elks Lodge #1842      |            |       |
| Premises Address:     | 2600 Barry's Resort Road  |            |       |
| Local Governing Body: | Matanuska-Susitna Borough |            |       |
| Community Council:    | None                      |            |       |
| Mailing Address:      | 2600 Barry's Resort Rd.   |            |       |
| City:                 | Wasilla                   | State:     | AK    |
|                       |                           | ZIP:       | 99654 |

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: | William Michael Southcott Jr | Contact Phone: | 907-982-7301 |
| Contact Email:    | mm-south@mtaonline.net       |                |              |

**Optional:** If you wish for AMCO staff to communicate with an 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: | Aella Dive Ibiss       | Contact Phone: | 907-715-1701 |
| Contact Email:   | grinnyma@mtaonline.net |                |              |



**Form AB-17: 2020/2021 Renewal License Application****Section 2 – Entity or Community Ownership Information**

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are **corporations** or **LLCs** must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below 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>

|                       |         |
|-----------------------|---------|
| Alaska CBPL Entity #: | 84692 D |
|-----------------------|---------|

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 **shareholder 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. **You must list ALL of your qualifying officials, additional copies of this page or a separate sheet of paper may be submitted if necessary.**

|                   |                              |        |              |          |       |
|-------------------|------------------------------|--------|--------------|----------|-------|
| Name of Official: | William Michael Southcott Jr |        |              |          |       |
| Title(s):         | President                    | Phone: | 907-982-7301 | % Owned: | -     |
| Mailing Address:  | PO Box 4993                  |        |              |          |       |
| City:             | Palmer                       | State: | AK           | ZIP:     | 99645 |

|                   |                     |        |              |          |       |
|-------------------|---------------------|--------|--------------|----------|-------|
| Name of Official: | Michael Sironen     |        |              |          |       |
| Title(s):         | Vice President      | Phone: | 907-355-4875 | % Owned: | -     |
| Mailing Address:  | 4040 N Snowgoose Dr |        |              |          |       |
| City:             | Wasilla             | State: | AK           | ZIP:     | 99654 |

|                   |                     |        |              |          |       |
|-------------------|---------------------|--------|--------------|----------|-------|
| Name of Official: | Madonna S Southcott |        |              |          |       |
| Title(s):         | Secretary           | Phone: | 907-982-7302 | % Owned: | .     |
| Mailing Address:  | PO Box 4993         |        |              |          |       |
| City:             | Palmer              | State: | AK           | ZIP:     | 99645 |

**Form AB-17: 2020/2021 Renewal License Application****Section 3 – Sole Proprietor Ownership Information**

Entities, such as corporations or LLCs, should skip this section. 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.

The following information must be completed for each licensee and each affiliate.

This individual is an: ☐ applicant ☐ affiliate

|                  |  |                |  |
|------------------|--|----------------|--|
| Name:            |  | Contact Phone: |  |
| Mailing Address: |  |                |  |
| City:            |  | State:         |  |
| Email:           |  |                |  |

This individual is an: ☐ applicant ☐ affiliate

|                  |  |                |  |
|------------------|--|----------------|--|
| Name:            |  | Contact Phone: |  |
| Mailing Address: |  |                |  |
| City:            |  | State:         |  |
| Email:           |  |                |  |

**Section 4 – 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 5.

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:

2018 2019

The license was regularly operated continuously throughout each year.

|                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|-------------------------------------|-------------------------------------|

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

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

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.

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

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.

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.

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|



**Form AB-17: 2020/2021 Renewal License Application****Section 6 – Violations and Convictions****Applicant violations and convictions in calendar years 2018 and 2019:**

Yes No

Have any notices of violation (NOVs) been issued for this license in the calendar years 2018 or 2019?☐ 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 2018 or 2019?

☐ 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 7 – 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.

☒

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 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.

☒

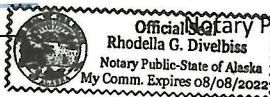
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Alcoholic Beverage Control Board or AMCO staff 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.

Signature of licensee

Signature of Notary Public

WILLIAM M. SOUTHOTT

Printed name of licensee

Official Notary Public in and for the State of  
Rhodella G. Divilbiss  
Notary Public-State of Alaska  
My Comm. Expires 08/08/2022

RGP 8-8-2022 Alaska

My commission expires: 8-8-2022

Subscribed and sworn to before me this 11<sup>th</sup> day of October, 2019.Seasonal License? Yes ☐ No ☒

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

|  |            |                  |           |        |            |
|--|------------|------------------|-----------|--------|------------|
| License Fee:                           | \$ 2500.00 | Application Fee: | \$ 300.00 | TOTAL: | \$ 2800.00 |
| Miscellaneous Fees:                    |            |                  |           |        |            |
| GRAND TOTAL (if different than TOTAL): |            |                  |           |        |            |

Department of Commerce, Community, and Economic Development  
**CORPORATIONS, BUSINESS &  
PROFESSIONAL LICENSING**

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database  
Download / Corporations / Entity Details

## ENTITY DETAILS

### Name(s)

| Type       | Name                    |
|------------|-------------------------|
| Legal Name | BPO ELKS LODGE NO. 1842 |

Entity Type: Nonprofit Corporation

Entity #: 84692D

Status: Good Standing

AK Formed Date: 1/30/2004

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2020

Entity Mailing Address: 2600 N BARRY'S RESORT DR, WASILLA, AK 99654

Entity Physical Address: 2600 N BARRY'S RESORT DR, WASILLA, AK 99654

### Registered Agent

Agent Name: WILLIAM MICHAEL SOUTHCOTT

Registered Mailing Address: 2600 N BARRY'S RESORT DR, PALMER, AK 99654

Registered Physical Address: 2600 N BARRY'S RESORT DR, PALMER, AK 99654

### Officials

☐ Show Former

| AK Entity # | Name                      | Titles         | Owned |
|-------------|---------------------------|----------------|-------|
|             | ALAINA ANDERSON           | Treasurer      |       |
|             | BRUCE BROWN               | Director       |       |
|             | JOHN DOUGLASS             | Director       |       |
|             | MADONNA SOUTHCOTT         | Secretary      |       |
|             | MICHAEL SIRONEN           | Vice President |       |
|             | RICK HARRINGTON           | Director       |       |
|             | WILLIAM MICHAEL SOUTHCOTT | President      |       |

## Filed Documents

| Date Filed | Type                | Filing                        | Certificate |
|------------|---------------------|-------------------------------|-------------|
| 1/30/2004  | Creation Filing     | <a href="#">Click to View</a> |             |
| 4/18/2005  | Change of Officials | <a href="#">Click to View</a> |             |
| 6/21/2006  | Biennial Report     | <a href="#">Click to View</a> |             |
| 3/16/2010  | Biennial Report     | <a href="#">Click to View</a> |             |
| 3/16/2010  | Biennial Report     | <a href="#">Click to View</a> |             |
| 3/19/2010  | Agent Change        | <a href="#">Click to View</a> |             |
| 7/19/2012  | Biennial Report     | <a href="#">Click to View</a> |             |
| 10/16/2012 | Agent Change        | <a href="#">Click to View</a> |             |
| 9/20/2013  | Change of Officials | <a href="#">Click to View</a> |             |
| 9/23/2013  | Change of Officials | <a href="#">Click to View</a> |             |
| 10/02/2013 | Agent Change        | <a href="#">Click to View</a> |             |
| 7/24/2014  | Biennial Report     | <a href="#">Click to View</a> |             |
| 5/07/2015  | Change of Officials | <a href="#">Click to View</a> |             |
| 6/29/2015  | Change of Officials | <a href="#">Click to View</a> |             |
| 5/27/2016  | Biennial Report     | <a href="#">Click to View</a> |             |
| 6/19/2017  | Change of Officials | <a href="#">Click to View</a> |             |
| 4/19/2018  | Biennial Report     | <a href="#">Click to View</a> |             |
| 4/25/2018  | Agent Change        | <a href="#">Click to View</a> |             |
| 6/19/2019  | Agent Change        | <a href="#">Click to View</a> |             |
| 6/19/2019  | Change of Officials | <a href="#">Click to View</a> |             |

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

Alaska Alcoholic Beverage Control Board

## Master Checklist: Renewal Liquor License Application

|                    |                          |                 |         |
|--------------------|--------------------------|-----------------|---------|
| Doing Business As: | BPO Elks Lodge No. #1842 | License Number: | 3658    |
| License Type:      | Club                     |                 |         |
| Examiner:          | <i>Randi</i>             | Transaction #:  | 1158976 |

| Document                   | Received | Completed | Notes |
|----------------------------|----------|-----------|-------|
| AB-17: Renewal Application | 10/16    | 10/16     |       |
| App and License Fees       | 10/16    | 10/16     |       |

| Supplemental Document       | Received | Completed | Notes |
|-----------------------------|----------|-----------|-------|
| Tourism/Rec Site Statement  |          |           |       |
| AB-25: Supplier Cert (WS)   |          |           |       |
| AB-29: Waiver of Operation  |          |           |       |
| AB-30: Minimum Operation    |          |           |       |
| AB-33: Restaurant Affidavit |          |           |       |
| COI / COC / 5 Star          |          |           |       |
| FP Cards & Fees / AB-08a    |          |           |       |
| Late Fee                    |          |           |       |

|                    |  |
|--------------------|--|
| Names on FP Cards: |  |
|--------------------|--|

|   | Yes                                 | No                                  |
|---|-------------------------------------|-------------------------------------|
| Selling alcohol in response to written order (package stores)?                                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Mailing address and contact information different than in database (if yes, update database)? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| In "Good Standing" with CBPL (skip this and next question for sole proprietor)?               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |

LGB 1 Response:

☐ Waive ☐ Protest ☐ Lapsed

LGB 2 Response:

☐ Waive ☐ Protest ☐ Lapsed





Alaska Alcoholic Beverage Control Board

## Form AB-17: 2020/2021 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 are due to renew by December 31, 2019. 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 and submitted to AMCO's main office before any license renewal application will be reviewed. 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:             | BPO Elks Lodge No. #1842  | License #: | 3658  |
| License Type:         | Club                      |            |       |
| Doing Business As:    | BPO Elks Lodge #1842      |            |       |
| Premises Address:     | 2600 Barry's Resort Road  |            |       |
| Local Governing Body: | Matanuska-Susitna Borough |            |       |
| Community Council:    | North Lakes               |            |       |
| Mailing Address:      | 2600 Barry's Resort Rd    |            |       |
| City:                 | Wasilla                   | State:     | AK    |
|                       |                           | ZIP:       | 99654 |

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: | William Michael Southcott Jr | Contact Phone: | 907-982-7301 |
| Contact Email:    | mmSouth@mtaonline.net        |                |              |

**Optional:** If you wish for AMCO staff to communicate with an 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: | Nella Dovelbiss        | Contact Phone: | 907-775-1701 |
| Contact Email:   | grinnyma@mtaonline.net |                |              |



**Form AB-17: 2020/2021 Renewal License Application****Section 2 – Entity or Community Ownership Information**

Licensees who directly hold a license as an individual or individuals should skip to Section 3. General partnerships and local governments should skip to the second half of this page. All licensees that are **corporations** or **LLCs** must complete this section. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). The CBPL Entity # below 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>

|                       |         |
|-----------------------|---------|
| Alaska CBPL Entity #: | 84693 D |
|-----------------------|---------|

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 **shareholder 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. **You must list ALL of your qualifying officials, additional copies of this page or a separate sheet of paper may be submitted if necessary.**

|                   |                              |        |              |          |       |
|-------------------|------------------------------|--------|--------------|----------|-------|
| Name of Official: | William Michael Southcott Jr |        |              |          |       |
| Title(s):         | President                    | Phone: | 907-982-7301 | % Owned: | -     |
| Mailing Address:  | PO Box 4993                  |        |              |          |       |
| City:             | Palmer                       | State: | AK           | ZIP:     | 99645 |

|                   |                      |        |              |          |       |
|-------------------|----------------------|--------|--------------|----------|-------|
| Name of Official: | Michael Sironen      |        |              |          |       |
| Title(s):         | Vice President       | Phone: | 907-355-4275 | % Owned: | -     |
| Mailing Address:  | 4040 N. Snowgoose Dr |        |              |          |       |
| City:             | Wasilla              | State: | AK           | ZIP:     | 99654 |

|                   |                      |        |              |          |       |
|-------------------|----------------------|--------|--------------|----------|-------|
| Name of Official: | Madonna S. Southcott |        |              |          |       |
| Title(s):         | Secretary            | Phone: | 907-982-7302 | % Owned: | -     |
| Mailing Address:  | PO Box 4993          |        |              |          |       |
| City:             | Palmer               | State: | AK           | ZIP:     | 99645 |

**Form AB-17: 2020/2021 Renewal License Application****Section 3 – Sole Proprietor Ownership Information**

Entities, such as corporations or LLCs, should skip this section. 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.

The following information must be completed for each licensee and each affiliate.

This individual is an: ☐ applicant ☐ affiliate

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

This individual is an: ☐ applicant ☐ affiliate

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

**Section 4 – 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 5.

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:

2018 2019

The license was regularly operated continuously throughout each year.

|                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|-------------------------------------|-------------------------------------|

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

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

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.

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

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.

|                          |                          |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|

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-17: 2020/2021 Renewal License Application

## Section 6 – Violations and Convictions

Applicant violations and convictions in calendar years 2018 and 2019:

Yes No

Have any notices of violation (NOVs) been issued for this license in the calendar years 2018 or 2019?☐ ☒

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 2018 or 2019?

☐ ☒

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

## Section 7 – 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.

☒

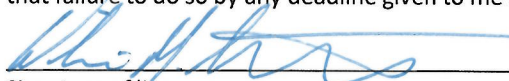
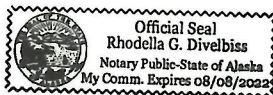
I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers, managers, general partners, or stakeholders) from what is currently approved and on file with the Alcoholic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

  
Signature of licensee  
Signature of Notary PublicWilliam M. Southcott  
Printed name of licenseeNotary Public in and for the State of AlaskaMy commission expires: 8.8.22Subscribed and sworn to before me this 11<sup>th</sup> day of October, 2019.Seasonal License? ☐ Yes ☒ No

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

|  |            |                  |           |        |            |
|--|------------|------------------|-----------|--------|------------|
| License Fee:                           | \$ 1200.00 | Application Fee: | \$ 300.00 | TOTAL: | \$ 1500.00 |
| Miscellaneous Fees:                    |            |                  |           |        |            |
| GRAND TOTAL (if different than TOTAL): |            |                  |           |        |            |