

# Notice of Violation

(3AAC 304.525)

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

Date: 1-25-18 License #/Type: 5470/Beverage Dispensary Tourism  
Licensee: Longhorn Liquor, Inc Address: Mil 136 Denali Hwy, Cantwell, AK  
DBA: Cantwell Lodge and Longhorn Saloon AMCO Case #: AB18-0086

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

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

You have an unreported change of officers. Details are as follows:

New officers added:

Chris C. Bulard – Vice President

Change in ownership:

Michael P Brooks – originally 20%, now 10%

Chris C. Bulard – 10%

Date of unreported change of officers/ownership: 12/6/2016

Your attention is referred to AS 04.11.050: Reports required of corporations

Date of unreported change of officers/ownership: 12/6/2016

Your attention is referred to AS 04.11.050: Reports required of corporations

+

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

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

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

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



Issuing Investigator: J. Hamilton

SIGNATURE: *FRH*

Delivered VIA: Mail

Received by:

SIGNATURE: *Armeda C. Bulard*

Date: *1-29-18*



THE STATE  
of **ALASKA**

Department of Commerce, Community and Economic Development  
Division of Corporations, Business and Professional Licensing

**COR**

**Corporations Section**

State Office Building, 333 Willoughby Avenue, 9<sup>th</sup> Floor

PO Box 110806, Juneau, AK 99811-0806

Phone: (907) 465-2550 • Fax: (907) 465-2974

Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)

Website: [Corporations.Alaska.Gov](http://Corporations.Alaska.Gov)

**Notice of Change of Officials**

**Domestic Business Corporation (AS 10.06)**

- This Notice of Change of Officials form is only for Domestic Business Corporations and is used to report changes between biennial reporting periods in: officers, directors, alien affiliates, and shareholders.
- This Notice of Change of Officials will not be filed if the entity's biennial report is not current. To verify the entity's biennial report due date, go online to [www.Corporations.Alaska.Gov](http://www.Corporations.Alaska.Gov) and select, *Search Corporations Database*
- Standard processing time for complete and correct filings submitted to this office is approximately 10-15 business days. All filings are reviewed in the date order they are received.
- The information you submit is a public record and will be posted on the State's website.

**1. Important:**

AS 10.06.813

Each Domestic Business Corporation is required to notify this office when there is a change of officials.  
— AS 10.06.813

Failure to meet this requirement may result in involuntary dissolution of the entity's authority to transact business in the State of Alaska.  
— AS 10.06.633(5)(7)

The Domestic Business Corporation is to keep and make available the records of the official(s) changes.  
— AS 10.06.430

**2. Fee:**

\$25 Nonrefundable Filing Fee (CORF)

3 AAC 16.030(b)

Mail this form and the non-refundable \$25 filing fee in U.S. dollars to the letterhead address. Make the check or money order payable to the State of Alaska, or use the attached credit card payment form.

**3. Entity Information:**

AS 10.06.813

Entity Name: LONGHORN LIQUOR, INC.

Alaska Entity Number: 518570



**4. REMOVE from Record:**

AS 10.06.813(b)

The following officials (officers, directors, shareholders, and alien affiliates) will be completely removed from the record as a result of this filing. If necessary, use the following SUPPLEMENT page.

Name: NA  
 Name: \_\_\_\_\_  
 Name: \_\_\_\_\_

Name: \_\_\_\_\_  
 Name: \_\_\_\_\_

If an official is not being removed from record, then list them in Item #5 below (with their current information).

**5. ALL Current Officials:**

AS 10.06.813(b) and  
 AS 10.06.950

The following is a complete list of ALL remaining and new officials who will be on record as a result of this filing. Domestic Business Corporations must have a President, Secretary, Treasurer, and at least one Director. The President and the Secretary cannot be the same person unless the President is 100% shareholder. The entity must also provide all shareholders who own 5% or more of the issued shares, and all alien affiliates.  
 — AS 10.06.453 and 10.06.483

List ALL officials and their current information to be on record.  
**BOLD fields are required.**

FULL LEGAL NAME	COMPLETE MAILING ADDRESS	% Owned	Shareholder	PRESIDENT	Vice-President	SECRETARY	TREASURER	DIRECTOR	Assistant Secretary	Assistant Treasurer	Alien Affiliate
Christopher Charles Bulard	P.O. Box 228 Cantwell, AK 99729	10	X		X			X			
Michael Paul Brooks	P.O. Box 93 Cantwell, AK 99729	10	X	X				X			
Janet Eileen Brooks	P.O. Box 93 Cantwell, AK 99729	70	X				X	X			
Armeda Ann Bulard	P.O. Box 87 Cantwell, AK 99729	10	X			X	X				

→ If necessary, use the following SUPPLEMENT page.

**6. Required Signature:**

AS 10.06.813(b) and  
 AS 10.06.825

The Notice of Change of Officials must be signed by the President or Vice-President of the corporation. Persons who sign documents filed with the commissioner that are known to the person to be false in material respects are guilty of a class A misdemeanor.

Signature: Original signed by Michael P. Brooks Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title of Authorized Signer:  President — or —

Vice-President





THE STATE  
 of  
**ALASKA**

Department of Commerce, Community, and Economic Development  
 Division of Corporations, Business, and Professional Licensing  
 PO Box 110806, Juneau, AK 99811-0806  
 (907) 465-2550 - Email: [corporations@alaska.gov](mailto:corporations@alaska.gov)  
 Website: [Corporations.Alaska.gov](http://Corporations.Alaska.gov)

FOR DIVISION USE ONLY

Web-12/6/2016 3:50:33 PM

**Business Corporation**  
**2017 Biennial Report**  
 For the period ending December 31, 2016

- This report is due on January 02, 2017
- \$100.00 if postmarked before February 02, 2017
- \$137.50 if postmarked on or after February 02, 2017

**Entity Name:** LONGHORN LIQUOR, INC.  
**Entity Number:** 51857D  
**Home Country:** UNITED STATES  
**Home State/Province:** ALASKA

**Registered Agent**  
**Name:** Armeda Bulard  
**Physical Address:** 4 BLACK BEAR LANE,  
 CANTWELL, AK 99729  
**Mailing Address:** PO BOX 87, CANTWELL, AK  
 99729

**Entity Physical Address:** MILE 136 DENALI HWY, CANTWELL, AK 99729

**Entity Mailing Address:** P O BOX 87, CANTWELL, AK 99729

Please include all officials. Check all titles that apply. Must use titles provided. All domestic business corporations must have a president, secretary, treasurer and at least one director. The secretary and the president cannot be the same person unless the president is 100% shareholder. The entity must also list any alien affiliates and those shareholders that hold 5% or more of the issued shares.

Name	Address	% Owned	Titles
Janet E Brooks	PO BOX 93, CANTWELL, AK 99729	70	Director, Shareholder, Treasurer
Michael P Brooks	P.O. BOX 93, CANTWELL, AK 99729	10	Director, President, Shareholder
Armeda A Bulard	PO BOX 87, CANTWELL, AK 99729	10	Director, Secretary, Shareholder
Chris C Bulard	P. O. Box 228, Cantwell, AK 99729	10	Director, Shareholder, Vice President

**Purpose:** LIQUOR SALES

**NAICS Code:** 445310 - BEER, WINE, AND LIQUOR STORES

**New NAICS Code (optional):**

Complete the below stock information on record with the Department. You may not change your authorized shares with this form. An amendment is required. Fill in number of shares issued.

Class	Series	Authorized	Par Value	Amount Issued
Common		100000	\$1.00	100000



- COMPLETE THIS SECTION**
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
  - Print your name and address on the reverse so that we can return the card to you.
  - Attach this card to the back of the mailpiece, or on the front if space permits.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *[Signature]*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery \_\_\_\_\_

1. Article Address

**Longhorn Liquor, Inc.  
 dba: Cantwell Lodge and Longhorn Saloon  
 PO Box 87  
 Cantwell, AK 99729**

Is address different from item 1?  Yes  
 Delivery address below:  No

3. Service Type

Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
 (Transfer from service label)

7013 2250 0000 9617 6719

PS Form 3811, July 2013

Domestic Return Receipt

*Frank*

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

• Sender: Please print your name, address, and ZIP+4® in this box.

First-Class Mail  
 USPS  
 Postage & Fees Paid  
 Permit No. G-10



UNITED STATES POSTAL SERVICE



Alaska Alcoholic Beverage Control Board

# Tourism Statement

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be submitted to AMCO's main office before any tourism license application will be reviewed.

## Section 1 – Establishment Information

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

Doing Business As:	Cantwell Lodge and Longhorn Saloon	License #:	5470
License Type:	Beverage Dispensary - Tourism		

## Section 2 – Tourism Statement

2.1. Explain how issuance of a liquor license at your establishment has/will encourage tourism.

As we are an established lodge that has been operating under our ownership for 25 years we have always catered to tourism. With the growing number of tourists each year Cantwell  
Continued on next page →

2.2. Explain how the facility was/will be constructed or improved as required by AS 04.11.400(d)(1):

Cantwell lodge was a fully functional lodge with 20 rooms until an arson claimed the 20 rooms. Cantwell lodge is continuing to add rooms to continue being a fully functional place for tourism and the locals.

2.3 Does the licensee or applicant for this liquor license also operate the tourism facility in which this license is located?

YES

NO

2.4 If "no" who operates the tourism facility?

N/A

## Section 2 Tourism Statement

### 2.1 continued:

has become a go to spot. Our business offers several items including (hiking, berry picking, photography, snowmachining, cross country skiing and ski joring) plus access to the many other tourist oriented businesses in the area.

A place tourists to have the ability to get a meal, drink or have a place to stay is a must. As tourism is growing in the Centwell area, we as a full service business must continue to grow with the influx of folks that come into our area. That way we can continue providing them with the amenities that they need, want and are accustomed to.



Alaska Alcoholic Beverage Control Board

Tourism Statement

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

2.5 Do you offer room rentals to the traveling public?

YES [checked] NO [ ]

If "yes" answer the following questions:

How many rooms are available?

After being victimized by arson we have established 11 rooms with the remaining 9 rooms under construction.

How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for food preparation along with refrigeration and cooking appliance devices, including a microwave)?

All of the rooms provide a refrigerator, microwave and coffee pot. For full service meals they can enter the cafe.

Do you stock or plan to stock alcoholic beverages in guest rooms?

YES [ ] NO [checked]

If "no" is your facility located within an airport terminal?

YES [ ] NO [checked]

2.6 If your establishment includes a dining facility, please describe that facility. If it does not please write "none".

Our dining facility seats 15-20 people, provides breakfast and dinner and is adjacent to a full service kitchen. It is not located in the bar, but if a customer wants to eat in the bar, they can with a full service wait staff.

2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or trips, rental equipment for guests, other activities that attract tourists), please describe them. If they are not offered, please write "none".

Hiking, berry picking, photography, snow machining, cross country skiing, ski touring and access to surrounding businesses that include hand made gifts, flight seeing, dog sled tours and fly fishing.



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  
**Beverage Dispensary – Tourism License**  
**Form AB-17d: 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 beverage dispensary-tourism liquor license that is 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:	Longhorn Liquor, Inc	License #:	5470
License Type:	Beverage Dispensary - Tourism		
Doing Business As:	Cantwell Lodge and Longhorn Saloon		
Premises Address:	Mile 136 Denali Hwy.		
Local Governing Body:	Denali Borough		
Community Council:	None		

Mailing Address:	PO Box 87				
City:	Cantwell	State:	Alaska	ZIP:	99729

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:	Janet Brooks	Contact Phone:	907-388-2709
Contact Email:	akmikeb@yahoo.com		

**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:	N/A	Contact Phone:	
Contact Email:			



Alaska Alcoholic Beverage Control Board

Form AB-17d: 2020/2021 Tourism 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 #: 518570

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.

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Michael Brooks, President, 907-388-8743, 10, PO Box 93, Cantwell, Alaska, 99729

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Chris Bulard, vice President, 907-982-1363, 10, PO Box 278, Cantwell, Alaska, 99729

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Armeda Bulard, Secretary, 907-388-9493, 10, PO Box 87, Cantwell, Alaska, 99729



Alaska Alcoholic Beverage Control Board

Form AB-17d: 2020/2021 Tourism 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 #: 51857 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.

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Janet Brooks, Treasurer, 907-388-2709, 70, PO Box 93, Cantwell, Alaska, 99729

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Empty

Table with 5 columns: Name of Official, Title(s), Phone, % Owned, Mailing Address, City, State, ZIP. Row 1: Empty



# Form AB-17d: 2020/2021 Tourism 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 (spouse)

Name:	N/A			Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an:  applicant  affiliate (spouse)

Name:	N/A			Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

## Section 4 – Alcohol Server Education

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

Initials

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



## Section 5 – License Operation

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

2018    2019

The license was regularly operated continuously throughout each year.

2018     2019

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

2018     2019

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.

2018     2019

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.

2018     2019

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.

*Closed Jan.-Mar., Oct. - Dec. 2018 / closed Oct - Dec 2019*



# Alaska Alcoholic Beverage Control Board Form AB-17d: 2020/2021 Tourism Renewal License Application

## Section 6 - Violations and Convictions

Applicant violations and convictions in calendar years 2018 and 2019:

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?

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 (ABC) 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.

I am submitting as part of this application a completed copy of the attached Tourism Statement form, for review by the Alcoholic Beverage Control Board.

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.

Janet E Brooks  
Signature of licensee

[Signature]  
Signature of Notary Public

Janet E Brooks  
Printed name of licensee

Notary Public In and for the State of Alaska

My commission expires: N/A

Subscribed and sworn to before me this 21<sup>st</sup> day of December, 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):					

**From:** [Alcohol Licensing, CED ABC \(CED sponsored\)](#)  
**To:** [akarmeda@yahoo.com](mailto:akarmeda@yahoo.com)  
**Cc:** [Alcohol Licensing, CED ABC \(CED sponsored\)](#)  
**Subject:** 5470 INITIALS NEEDED  
**Date:** Tuesday, February 4, 2020 2:00:18 PM  
**Attachments:** [5470 INITIALS needed.pdf](#)

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Hi Armeda:

Please initial and return the form attached to this email.

Our fax number is 907-334-2285

Give me a call at 269-0359 if you have any questions!

Feel better and have a good day!

*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.

*Any guidance provided by this electronic communication is not a binding legal opinion, ruling, or interpretation that may be relied upon, but merely guidance concerning existing statutes and regulations. There may be other unique or undisclosed facts, circumstances, and information that may have changed any guidance provided in this communication.*

**CONFIDENTIALITY NOTICE:** *This communication is intended for the sole use of the individual or entity to whom it is addressed, is covered by the Electronic Communications Privacy Act (18 USC § 2510-2521), and may contain Confidential Official Use Only Information that may be exempt from public release under the Freedom of Information Act (5 USC § 552). If you are not the intended recipient, you are prohibited from disseminating, distributing, or copying any information contained in this communication.*

*The State of Alaska cannot guarantee the security of e-mails sent to or from a state employee outside the state e-mail system. If you are not the intended recipient or receive this communication in error, please notify the sender by reply e-mail and delete the original message and all copies from your computer.*