

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: 07-19-2018

License #/Type: 746 / Club

Licensee: Craig Lodge #1206

Address: 601 Water St., Craig 99921

DBA: Loyal Order of Moose #1206

AMCO Case #: AB18000846

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.

During routine licensed premises inspection of Loyal Order of Moose #1206, it was found the on duty bartender Virginia Lawnicki did not possess a valid alcohol server education card.

This is a violation of AS 04.21.025(c) and 3AAC304.465

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. IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.

***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. 7th Ave, Suite 1600

Anchorage, Alaska 99501

amco.enforcement@alaska.gov

Issuing Investigator: S. Johnson

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA: Mail

Date:

To; AMCO Enforcement

From; Craig Lodge #1206

DBA: Loyal Order of moose #1206

Alaska Liquor license # 746

I am replying to notice of violation dated 7/19/2018 case # AB18000846 concerning Virginia Lawnicki found on duty serving alcohol without possession of alcohol server education card.

I am hereby informing you that she has passed her alcohol server course and has her certificate in hand as do I Robert Sabin Administrator/Manager and Corporation Secretary. I Have also checked all of our other current servers and they have a valid card in their possession.

I hope our actions on this matter are satisfactory.

Submitted this day 7/30/2018

Robert D. Sabin





Certificate of Completion

This is to certify that

Virginia Lawnicki

has successfully completed the
Alaskatap.com Responsible Beverage
Server and Seller Training Program

Edward D McLean, Administrator
www.Alaskatap.com

Date: 07/25/2018
Expiration: 36 Months
Certificate #: 2955
Birth Date: 08/07/1970

NOTE This is your temporary certification form. Your official certification card will be mailed to you in 7-14 days.
Please contact Alaska Chair at 800-478-2427 with questions regarding this certification.



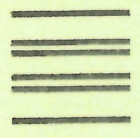
POSTNET barcode

RECEIVED
 JUL 30 2018
 ALCOHOL & MARIJUANA CONTROL OFFICE
 STATE OF ALASKA

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

Alcohol & Marijuana Control Office
 Attn: Jason Davies
 550 West 7th Avenue, Suite 1601
 Anchorage, AK 99501

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



UNITED STATES POSTAL SERVICE

SENDER: 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.

Article Addressed to:

Loyal Order of Moose #1206
 PO Box 113
 Craig, AK 99921

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Robert D. Seavey* Agent

B. Received by (Printed Name) *Robert D. Seavey* Addressee

C. Date of Delivery *7-27-18*

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

Article Number **7012 3460 0000 2166 5342**
 (Transfer from service label)



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: | Craig Lodge #1206 | License #: | 746 |
| License Type: | Club | | |
| Doing Business As: | Loyal Order of Moose #1206 | | |
| Premises Address: | 601 Water Street | | |
| Local Governing Body: | City of Craig | | |
| Community Council: | None | | |
| Mailing Address: | PO Box 113 | | |
| City: | CRAIG | State: | AK |
| | | ZIP: | 99924 |

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: | Robert Sabin | Contact Phone: | 907-826-3216 |
| Contact Email: | Lodge 1206 @ moose units, org | | |

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: | | Contact Phone: | |
| Contact Email: | | | |



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 #: | 25451D |
|-----------------------|--------|

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.

Initials: RDA

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: | ARTHUR RAY | | | |
| Title(s): | President | Phone: | 907-401-1647 | % Owned: 0 |
| Mailing Address: | PO Box 224 | | | |
| City: | CRATIC | State: | AK | ZIP: 99921 |

| | | | | |
|-------------------|----------------|--------|--------------|------------|
| Name of Official: | BUCK BAZINGT | | | |
| Title(s): | Vice President | Phone: | 907-826-2264 | % Owned: 0 |
| Mailing Address: | PO Box 261 | | | |
| City: | CRATIC | State: | AK | ZIP: 99921 |

| | | | | |
|-------------------|----------------|--------|--------------|------------|
| Name of Official: | LARRY WILLIAMS | | | |
| Title(s): | Director | Phone: | 907-826-2188 | % Owned: 0 |
| Mailing Address: | PO Box 636 | | | |
| City: | CRATIC | State: | AK | ZIP: 99921 |

- SECRETARY -

NAME of Official - Robert Sabido - ADMINISTRATOR / MANAGER
Address - PO Box 285 PH# 907-826-2450
ORATE AIC 99921

NAME of Official - William Bazinet - TREASURER ✓
Address - PO Box 112
Klawock, AIC. 99921 PH# 907-209-5512

AMCO
DEC 05 2019



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. <i>If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this application.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both of the calendar years. <i>If this box is checked, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement, unless a complete copy of the form (including fees) has already been submitted for that year.</i> | <input type="checkbox"/> | <input type="checkbox"/> |



Alaska Alcoholic Beverage Control Board

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: [X]

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: [X]

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.

[Initials]

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.

[Initials]

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.

[Initials]

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 licensee

[Signature of Notary Public]

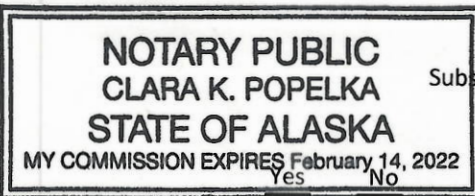
Signature of Notary Public

Robert D. Sabin

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 02/14/2022



Subscribed and sworn to before me this 27 day of November, 2019.

Seasonal License? [] [X]

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

Table with columns for License Fee (\$1200.00), Application Fee (\$300.00), TOTAL (\$1500.00), Miscellaneous Fees, and GRAND TOTAL.

