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: 10/8/19

Licensee: Bullwinkle's Inc.

DBA: Bullwinkle's Pizza

License #/Type: 188 Restaurant/Eating Place

Address: 318 Willoughby Ave., Juneau AK 99801

AMCO Case #: AM191551

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 inspection of licensed premises; on duty manager Sean Stredicke was found not to have a current alcohol server education card on his person or a valid copy available. He was unsure if he had a current card or if his was expired.

This is a violation of: Sec. 04.21.025. Alcohol server education course.

3 AAC 304.465. Alcohol server education course

(a) While selling or serving alcoholic beverages, a person required under AS 04.21.025 to complete an alcohol server education course and the person's on-duty supervisor shall carry or have available to show a current course card or a photocopy of the card certifying completion of an approved alcohol server education course.

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. 7th Ave, Suite 1600 Anchorage, Alaska 99501 <u>amco.enforcement@alaska.gov</u>

Issuing Investigator: S. Johnson

Received by:

SIGNATURE:

Delivered VIA: Mail

SIGNATURE:

Date:

From:	Davies, Jason M (CED)
To:	bullwinkles1@gci.net; Dave Macal; Sean Stredicke
Cc:	CED AMCO Enforcement (CED sponsored)
Subject:	RE: Response to Notice of Violation
Date:	Tuesday, October 15, 2019 9:55:00 AM

Morning,

Thank you for the reply to the notice of violation. Please provide copies of either the certificate of completion or the server cards for the employees in question.

Regards,

Jason M Davies – Criminal Justice Tech I AMCO/ENFORCEMENT <u>jason.davies@alaska.gov</u> 907-754-3410

From: bullwinkles1@gci.net [mailto:bullwinkles1@gci.net]
Sent: Tuesday, October 15, 2019 9:39 AM
To: CED AMCO Enforcement (CED sponsored) <amco.enforcement@alaska.gov>
Cc: Sean Stredicke <s_stredicke@hotmail.com>; Dave Macal <sarcasticwombat@gmail.com>
Subject: Response to Notice of Violation

To whom it may concern,

In response to the Notice of Violation, AMCO Case # AM 191551 Bullwinkle's Inc reviewed all personal and verified current and expired alcohol server education cards. Those employees who were expired attended the class offered this past Sunday, 10/13/2019. In addition protocol has been put in place to assure all employees who serve alcohol have the current card.

Thank You,

Mitch Falk President Bullwinkle's Inc 907-463-5252



Virus-free. www.avast.com

/2023 **EXPIRES ON** 176440 10 101 Medicko CERTIFICATE # 691 Birthdate Signature Name 3 (not valid for use as identification www.alaskacharr.com 800-478-2427 or 907-274-8133 Frotessi a hand a nstructor



Alaska Alcoholic Beverage Control Board

Form AB-17: 2021/2022 License Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540,3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will
- be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

Licensee (Owner):	Bullwinkle's, Inc.	License #:	188
License Type:	Restaurant or Eating Place		
Doing Business As:	Bullwinkle's Pizza		
Premises Address:	318 Willoughby Ave.		
Local Governing Body:	City & Borough of Juneau		
Community Council:	None	4	

If your mailing address has changed, write the NEW address below:

Mailing Address:	318 WIlloughby Ave	е.			
City:	Juneau	State:	AK	ZIP:	99801

Section 1 - Licensee Contact Information

Contact Licensee: The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	Mitch Falk	Contact Phone:	907-463-5252
Contact Email:	bullwinkles1@gci.net		

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	Contact Phone:
Contact Email:	

Name of Contact:	Contact Phone:
Contact Email:	

Name of Contact:	Contact Phone:	
Contact Email:		1

[Form AB-17] (rev09/23/2020)

Page 1 of 4

AMCO



Alaska Alcoholic Beverage Control Board Form AB-17: 2021/2022 License Renewal Application

Section 2 -- Entity or Community Ownership Information

Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #:	12712D

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within <u>10 days</u> of the change and <u>must be accompanied by</u> a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for <u>each new officer</u> with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of <u>any</u> type including non-profit must list ONLY the following:
 - All shareholders who own 10% or more stock in the corporation
 - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of <u>any</u> type must list ONLY the following:
 - All Members with an ownership interest of 10% or more
 - All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - o Each Partner with an interest of 10% or more
 - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	Mitch Falk			
Title(s):	Pres.	Phone:	907-463-5252	% Owned: 0
Mailing Address:	318 Willoughby Ave.			
City:	Juneau	State:	AK	ZIP: 99801

Name of Official:	Lynette Anderson					
Title(s):	V.Pres , Secretary,	Phone:	907-723-4098	% Own	ned:	0
Mailing Address:	318 Willoughby Ave.	_				
City:	Juneau	State:	АК	ZIP:	9980	10

Name of Official:	Falk Anderston Commun	nity Propert	<u>y Trust</u>				
Title(s):	Shareholder	Phone:	(907) 463-5252 907	-723-4098	% Own	ed:	100
Mailing Address:	318 WILLOUGHBY AV	E					
City:	JUNEAU	State:	AK	•	ZIP:	99	801
					N .		

[Form A8-17] (rev09/23/2020)

Dec 04 2020

AMCO RECV

INITALHE

Page 2 of 4



Alaska Alcoholic Beverage Control Board Form AB-17: 2021/2022 License Renewal Application

Section 3 - Sole Proprietor Ownership Information

Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within <u>10 days</u> of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for <u>each new owner or officer</u> and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require.

	1	Affiliate			1		
Name:				Contact Phone:			
Mailing Address:							
City:		· ·	State:		ZIP:		
Email:							
ils individual is an:	Apolicant	Affiliate		••••••••••••••••••••••••••••••••••••••			
Name:				Contact Phone:			
Mailing Address:	i i						
City:			State:		ZIP:	1	
Email:							
						1 I	x
		specific season each y	ear. (Seasonal)				,
The license was only o I <u>f your operation date</u>			ear. (Seasonal)				
If your operation date	<u>is have changed,</u> perated to meet	<u>list them below:</u> to the minimum requiren	ear. (Seasonal) nent of 240 total hours <i>cumentation must be ors</i>				
If your operation date The license was only o <u>A complete A8-30: Proof</u> The license was not op hours each year, durin	es have changed, perated to meet for Minimum Oper perated at all or w ong one or both ca	<u>list them below:</u> toto the minimum requiren ation Checklist, and all do vas not operated for at slendar years. <u>A complet</u>	nent of 240 total hours cumentation must be ors least the minimum req te form AB-29: Waiver of	p <i>yided with this form.</i> puirement of 240 total	ated.		
If your operation date The license was only o <u>A complete A8-30: Proof</u> The license was not op hours each year, durin and corresponding free o If you have not me	es have changed, perated to meet fof Minimum Oper perated at all or w ng one or both ca must be submitted et the minimum	<u>list them below:</u> the minimum requiren ation Checklist, and all do vas not operated for at elendar years. <u>A complet</u> with this application for s a number of hours o	nent of 240 total hours cumentation must be ors least the minimum req te form AB-29: Waiver of ach colendar year during f operation in 2020,	<u>wided with this form.</u> wirement of 240 total <i>Operation Application</i> .	pay the fe		
If your operation date The license was only o <u>A complete A8-30</u> : Proof The license was not op hours each year, durin and corresponding free to If you have not me	is have changed, perated to meet for Minimum Oper perated at all or w ong one or both ca must be submitted at the minimum plete AB-29 is r	<u>list them below:</u> toto the minimum requiren ation Checklist, and all do vas not operated for at slendar years. <u>A complet</u> with this application for e the this application for e	nent of 240 total hours cumentation must be ors least the minimum req te form AB-29: Waiver of ach colendar year during f operation in 2020,	wided with this form. uirement of 240 total Operation Application, which the license was not oper you are not required to " and COVID is listed as t	pay the fe		ver a
If your operation date The license was only o <u>A complete AR-30</u> : Proof The license was not op hours each year, durin <u>and corresponding frees</u> If you have not me <u>comp</u> ave ANY Notices of Vio	is have changed, perated to meet (of Minimum Oper perated at all or wing one or both can must be submitted at the minimum plete AB-29 is r	the minimum requiren ation Cherklist, and all do vas not operated for at elendar years. <u>A complet</u> with this application for e a number of hours of equired with Section cottoor 5 with bed for this license 0	nent of 240 total hours currentation must be bro least the minimum req e form AB-29: Waiver of mach calendar year during f operation in 2020, n 2 marked "OTHER intel one and a R has ANY person or	wided with this form. uirement of 240 total Operation Application, which the license was not oper you are not required to " and COVID is listed as t	pay the fo the reason		
If your operation date The license was only o <u>A complete A8-30: Proof</u> The license was not op hours each year, durin <u>and corresponding fress</u> <u>If you have not me</u> <u>comp</u> ave ANY Notices of Vio privicted of a violation of	is have changed, perated to meet for Minimum Oper perated at all or wing one or both can must be submitted in the minimum plete AB-29 is r lation been issues of Title 04, 3AA	list them below: to _to	nent of 240 total hours currentation must be or- least the minimum req eform AB-29: Waiver of ach colendar year during f operation in 2020, n 2 marked "OTHER Hations and: R has ANY person or bance adopted unde	wided with this form. uirement of 240 total Operation Application, which the license was not oper you are not required to " and COVID is listed as t Converte License entity in this application	pay the fe the reason been 2020?	L Yes X	No

[Form AB-17] (rev09/23/2020)

Dec 04 2020

AMCO RECV

AMOU-

Page 3 of 4

可如主义的 加加的



Section 6 - Certifications

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, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by 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 and potentially expired if I do not comply with statutory or regulatory requirements.
- 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 husiness.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons 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, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.
- 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 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.

STATE OF ALASKA OFFICIAL SEAL C. Demmert ignature of Notary Public Signature of licensee NOTARY PUBLIC My Commission Expires 12/12/2020 Alaska Mitch Falk Notary Public in and for the State of: Printed name of licensee My commission expires: 12/12/20 October

Subscribed and sworn to before me this $5 th_{day}$ of _____ 20 20

Restaurant/Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit Recreational Site applications must include a completed Recreational Site Statement Tourism applications must include a completed Tourism Statement Wholesale applications must include a completed AB-25: Supplier Certification

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

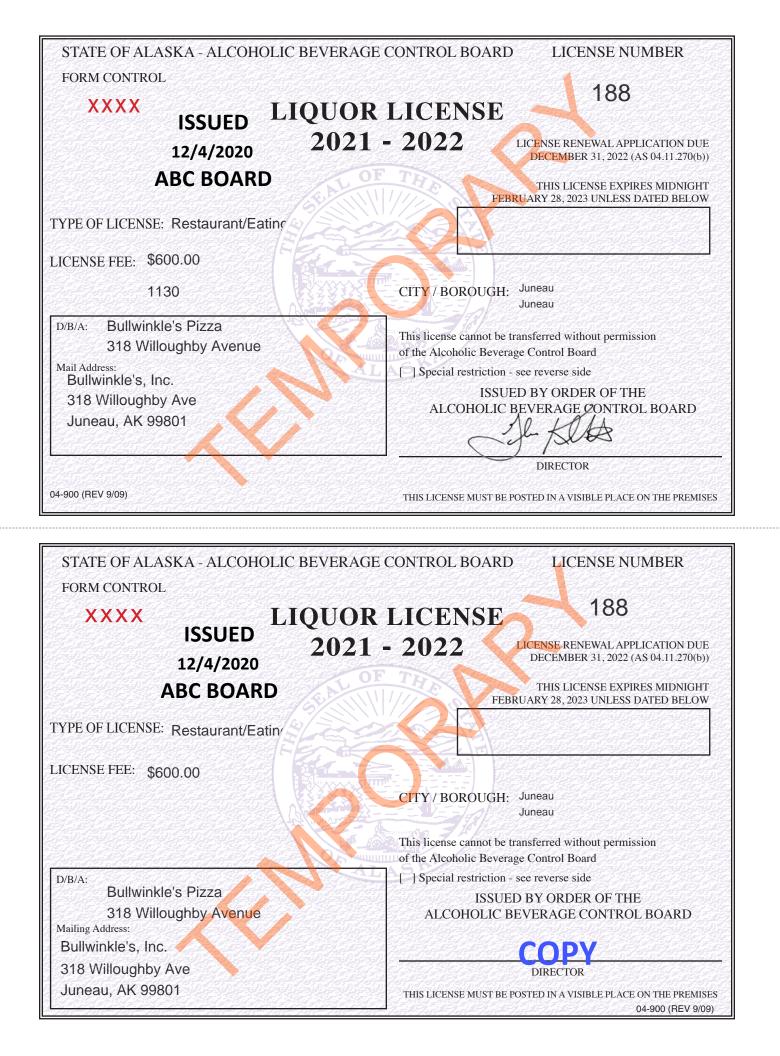
FOR OFFICE USE ONLY

License Fee:	\$	600	Application Fee:	\$ 300.00	Misc. Fee:	\$
	1.1		Total Fees Due:			\$ 900

[Form AB-17] (rev09/23/2020)

OCT 2 0 2020

Page 4 of 4





Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:		License Number:		
License Type:				
Examiner:		Transaction #:		

Document	Received	Completed	Notes
AB-17: Renewal Application			
App and License Fees			

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		
[Master Checklist: Renewal] (rev 09/20/2018)	Pag	ge 1 of 1

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)

Туре	Name
Legal Name	BULLWINKLE'S, INC.
Entity Type:	Business Corporation
Entry type.	
Entity #:	12712D
Status:	Good Standing
AK Formed Date:	1/2/1974
Duration/Expiration:	Perpetual
Home State:	ALASKA
Next Biennial Report Due:	1/2/2022
Entity Mailing Address:	318 WILLOUGHBY AVE, JUNEAU, AK 99801
Entity Physical Address:	318, WILLOUGHBY AVE, JUNEAU, AK 99801
Registered Agent	
Agent Name:	Mitch Falk

Registered Mailing Address: 318 WILLOUGHBY AVE, JUNEAU, AK 99801

Registered Physical Address: 318 WILLOUGHBY AVE, JUNEAU, AK 99801

Officials

□Show Former

AK Entity #	Name	Titles	Owned
	Lynette Anderson	Director, Secretary, Shareholder, Vice President	50.00
	Mitch Falk	Director, President, Shareholder, Treasurer	50.00

Filed Documents

Date Filed	Туре	Filing	Certificate
1/02/1974	Creation Filing		
1/29/1986	Biennial Report		
12/31/1987	Biennial Report		
2/02/1990	Biennial Report		
6/15/1992	Biennial Report	Click to View	
1/10/1994	Biennial Report	Click to View	
1/02/1996	Biennial Report	Click to View	
12/26/1997	Biennial Report	Click to View	
12/22/1999	Biennial Report	Click to View	
7/16/2002	Biennial Report	Click to View	
2/02/2004	Biennial Report	Click to View	
1/04/2006	Biennial Report	Click to View	
7/01/2008	Biennial Report	Click to View	
7/01/2008	Agent Change	Click to View	
7/27/2010	Biennial Report	Click to View	
8/17/2012	Biennial Report	Click to View	
12/24/2013	Biennial Report	Click to View	
11/23/2015	Biennial Report	Click to View	
12/04/2017	Biennial Report	Click to View	
7/24/2019	Agent Change	Click to View	
10/15/2019	Biennial Report	Click to View	

COPYRIGHT © STATE OF ALASKA · DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT ·

Alaska Business License # 88213

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing PO Box 110806, Juneau, AK 99811-0806

This is to certify that

BULLWINKLE'S, INC.

318 WILLOUGHBY AVE, JUNEAU, AK 99801

owned by

BULLWINKLE'S, INC.

is licensed by the department to conduct business for the period

October 2, 2020 to December 31, 2022 for the following line(s) of business:

72 - Accommodation and Food Services



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

Julie Anderson Commissioner





Department of Commerce, Community, and Economic Development

ALCOHOL & MARIJUANA CONTROL OFFICE

550 West Seventh Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

December 4, 2020

Bullwinkle's, Inc. DBA: Bullwinkle's Pizza Via Email: <u>bullwinkles1@gci.net</u>

Re: Restaurant/Eating Place License #188 #1690 DBA: Bullwinkle's Pizza

Dear Applicant:

I have received your application for renewal of your liquor license. Our staff has reviewed your application after receiving your application and required fees. Your renewal documents appear to be in order, and I have determined that your application is complete for purposes of AS 04.11.510, and AS 04.11.520.

Your application is now considered complete and will be sent electronically to your local governing body, your community council if your proposed premises is in Anchorage or certain locations in the Matanuska-Susitna Borough, and to any non-profit agencies who have requested notification of applications. The local governing body will have 60 days to protest the renewal of your license or waive protest.

A temporary license has been issued for this establishment.

Your application will be scheduled for the January 2021 board meeting for Alcoholic Beverage Control Board consideration. The address and call-in number for the meeting will be posted on our home page. The board will not grant or deny your application at the meeting unless your local government waives its right to protest per AS 04.11.480(a).

Please feel free to contact us through the <u>alcohol.licensing@alaska.gov</u> email address if you have any questions.

Sincerely,

Olivia Frank Occupational Licensing Examiner