

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

Alaska Alcoholic Beverage Control Board

Recreational Site Statement Form

A new, transfer, or renewal application for a <u>Recreational Site License</u> must be accompanied by a written statement that explains how the establishment meets the requirements listed under AS 04.11.210 and be deemed complete by AMCO staff, or your application will be returned.

	 You must provide complete responses to all questions or your application will be returned and will not be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff. All questions must be answered on this forms D.
	 All questions must be answered on this form. Do not attach other documents, or they will be returned. Do not provide documents and/or statements not requested.
	Mandatory Points to be included
1.	
	Explain what hours your establishment will be serving beer and wine in relation to your event hours.
	Clares open 1.5 hours before first pitch & service
	Gates open 1.5 hours before first pitch & service begins. Service closes ninth inning.
2.	Are baseball games, car races, hockey games, sled dog racing events, or curling matches regularly held during a season at your establishment? Yes: No:
	If No , what recreational events are regularly held during a season at your establishment that qualify you for this license under AS 04.11.210?
3.	Was this license exercised at least once during each of the two preceding calendar years in accordance with AS 04.11.330(d)? Yes: No:
	If the answer is no you are required to complete an AB 20 (Mail and Complete and and C
	If the answer is no, you are required to complete an AB-29 (Waiver of Operation Application) for your renewal application to be deemed complete with this office.
	The AB-29 form can be found here if needed:
	https://www.commerce.alaska.gov/web/Portals/9/pub/ABC/AlcoholLicenseApplicationForms/WaiverApp.pdf
4.	List the seasons of the events on your premises. (example: Baseball May 1-Sept 15, Dog Sled Races Oct 1- March 15)
	Buseball-Apreil 1st to Sept. 30th
reati	onal Site Form (rev 09/23/2020)



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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.

Establishment Contact Information

Licensee (Owner):	Mat-Su Baseball Inc			License #:	2931
License Type:	Recreational Site Season	al	,		
Doing Business As:	Mat-Su Miners				
Premises Address:	Hermo	n Brothe	ers Field		
Local Governing Body:	City of Palmer (MSB)				
Community Council:	None				
f your mailing address ha	s changed, write the NEW address	s below:			
Mailing Address:	P.O. Box 2690	7			
City:	Palmer	State:	AK	ZIP	99645
Contact Licensee:	Denise M. Christopher		Contact Phor	ne: 907	'-745-6401
			Contact Phor	ne: 907	-/45-6401
Contact Email:	gmminers@gci.net				
Optional: If you wish for AMCC	staff to communicate with anyone other	than the Con	tact Licensee about	your license, list	them below:
Name of Contact:			Contact Phor	ne:	
Contact Email:					
Name of Contact:			Contact Pho	ne:	
Name of Contact:					
CONTACT EMIGII:					
Name of Contact:			Contact Pho	ne:	
Contact Email:					
[Form AB-17] (rev09/23/2020)					Page 1 of 4



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 #:

739291

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 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer 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:
 - o All shareholders who own 10% or more stock in the corporation
 - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
 - All Members with an ownership interest of 10% or more
 - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - Each Partner with an interest of 10% or more
 - 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:	Terry Johnson				
Title(s):	President	Phone:	907-715-7526	% Ow	ned:
Mailing Address:	3060 N. Lazy Eight C	Ct., Ste 2-25	58		
City:	Wasilla	State:	AK	ZIP:	99654

Name of Official:	Shawn Norman				
Title(s):	Vice President	Phone:	907-227-9906	% Ov	med:
Mailing Address:	P.O. Box 455				
City:	Palmer	State:	AK	ZIP:	99645

Name of Official:	Molly Ahumada				
Title(s):	Treasurer	Phone:	907-315-0168	% Ow	ned:
Mailing Address:	5951 S. Hanson Loop				
City:	Wasilla	State:	AK	ZIP:	99623



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Alaska CBPL Entity #:

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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.

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 - o 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
 - $\circ\quad$ All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
 - Each Partner with an interest of 10% or more
 - 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:	Denise M. Christo	opher			
Title(s):	Secretary	Phone:	907-841-4589	% Ov	ned:
Mailing Address:	11335 E. Equestr	ian St			
City:	Palmer	State:	AK	ZIP:	99645
Name of Official:	T	~			
Title(s):		Phone:		% Ow	ned:
Mailing Address:			1		
City:		State:		ZIP:	
Name of Official:		***************************************			
Title(s):		Phone:		% Ow	ned:
Mailing Address:				1	
City:		State:	T	ZIP:	T T



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 10 days 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 each new owner or officer 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. If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected. 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 - License Operation Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: 2019 2020 1. The license was regularly operated continuously throughout each year. (Year-round) The license was only operated during a specific season each year. (Seasonal) If your operation dates have changed, list them below: The license was only operated to meet the minimum requirement of 240 total hours each calendar year. A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form. 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 calendar years. <u>A complete Form AB-29: Waiver of Operation Application</u> and corresponding fees must be submitted with this application for each calendar year during which the license was not operated. If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason. Section 5 - Violations and Convictions Yes No 1 convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020? If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been

If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.

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

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Form AB-17: 2021/2022 License Renewal Application

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 business.
- 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
 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
 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 be	half of myself or of the organized ontituthed land
	half 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 depial of this application or any other form
	provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

Signature officensee

Den Se M. Chikistane

Printed name of licensee

Signature of Notary Public

Notary Public in and for the State of:

My commission expires:

Subscribed and sworn to before me this

day of NOV

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

All renewal and supplemental forms are available online

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

FOR OFFICE USE ONLY

license Fee:	\$.	400	Application Fee:	\$ 300.00	Misc. Fee:	Ś	
			Total Fees Due:			\$ 700	



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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:				License Number:		
License Type:						
Examiner:				Transaction #:		
Document	Received	Completed	Notes			
AB-17: Renewal Applic	ation					
App and License Fees						
Supplemental Docume	ent Received	Completed	Notes			
Tourism/Rec Site State	ment					
AB-25: Supplier Cert (V	VS)					
AB-29: Waiver of Oper	ation					
AB-30: Minimum Oper	ation					
AB-33: Restaurant Affic	davit					
COI / COC / 5 Star						
FP Cards & Fees / AB-0	8a					
Late Fee						
Names on FP Cards:						
					Yes	No
Selling alcohol in response to written order (package stores)?						
Mailing address and co	ntact information diffe	rent than in datab	ase (if yes, upda	ate database)?		
In "Good Standing" wit	th CBPL (skip this and no	ext question for sc	le proprietor)?			
Officers and stockholde	ers match CBPL and dat	abase (if "No", de	termine if trans	fer necessary)?		
LGB 1 Response:		LGB 2 Res	sponse:			
Waive	Protest Lapse	d Wa	ive Pro	otest Lapsed		

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	MAT-SU BASEBALL, INC.

Entity Type: Nonprofit Corporation

Entity #: 73929D

Status: Good Standing

AK Formed Date: 8/8/2001

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2021

Entity Mailing Address: PO BOX 2690, PALMER, AK 99645

Entity Physical Address: 2075 GLENN HWY, PALMER, AK 99645

Registered Agent

Agent Name: Peter Christopher

Registered Mailing Address: PO BOX 2690, PALMER, AK 99645

Registered Physical Address: 2075 GLENN HWY, PALMER, AK 99645

Officials

□Show Former

AK Entity #	Name	Titles	Owned
	DENISE CHRISTOPHER	Secretary	
	JOHN ALCANTRA	Director	
	Molly Ahumada	Treasurer	

1 of 2

AK Entity #	Name	Titles	Owned
	Nikki Lee	Director	
	SHAWN NORMAN	Vice President	
	Terry Johnson	President	
	Vonda Best	Director	

Filed Documents

Date Filed	Туре	Filing	Certificate
8/08/2001	Creation Filing		
7/11/2003	Biennial Report	Click to View	
3/18/2005	Change of Officials	Click to View	
2/03/2006	Agent Change	Click to View	
8/03/2006	Biennial Report	Click to View	
8/24/2006	Amendment	Click to View	Click to View
3/13/2008	Biennial Report	Click to View	
12/16/2008	Biennial Report	Click to View	
4/20/2010	Biennial Report	Click to View	
5/05/2013	Biennial Report	Click to View	
7/01/2015	Biennial Report	Click to View	
4/28/2017	Biennial Report	Click to View	
5/14/2019	Biennial Report	Click to View	
7/19/2020	Change of Officials	Click to View	

 ${\tt COPYRIGHT} \circledcirc {\tt STATE} \ {\tt OF} \ {\tt ALASKA} \cdot \underline{{\tt DEPARTMENT}} \ {\tt OF} \ {\tt COMMERCE}, \ \underline{{\tt COMMUNITY}}, \ \underline{{\tt AND}} \ \underline{{\tt ECONOMIC}} \ \underline{{\tt DEVELOPMENT}} \cdot \underline{{\tt NOMIC}} \ \underline{{\tt OPARTMENT}} \ {\tt OPARTMENT} \ {\tt$

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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

MAT-SU MINERS

P.O. BOX 2690, PALMER, AK 99645

owned by

MAT-SU BASEBALL, INC.

is licensed by the department to conduct business for the period

November 25, 2019 to December 31, 2021 for the following line(s) of business:

71 - Arts, Entertainment and Recreation



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 24, 2020

Mat-Su Baseball Inc. DBA: Mat-Su Miners

Via Email: gmminers@gci.net

Re: Recreational Site-Seasonal License #2931 DBA: Mat-Su Miners

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 March 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.

S

Olivia Frank

Occupational Licensing Examiner