



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

# 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:	Olivia's at the Skagway Inn	License #:	3867
License Type:	Beverage Dispensary TOURISM SEASONAL		

### Section 2 – Tourism Statement

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

License enables restaurant to be profitable allow the business to open cooking tours and large gardens for the benefit of attracting tourist. We have dramatically increased occupancy by expanding services

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

A restaurant, bar, and live entertainment (cooking show) was built out from the funds profited from alcoholic beverage sales. Guests of tourist facility are able to enjoy 3 meals per day

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



2.4 If "no" who operates the tourism facility?

N/A



Alaska Alcoholic Beverage Control Board

## Tourism Statement

2.5 Do you offer room rentals to the traveling public?



If "yes" answer the following questions:

How many rooms are available?

TEN GUEST ROOMS

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)?

ZERO

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



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



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

The Skagway Inn operates the Bistro serving 3 meals daily. Breakfast to guest. Lunch and Dinner to general public (summer tourists)

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".

The Inn sells tours for other entities and produces live entertainment for tourists in saloon room

Currently Kitchen Science Alaska in morning and Legends + Lives in afternoon, are our current offerings.



STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

5/03/2021

ABC BOARD

**LIQUOR LICENSE**  
**2021 - 2022**

3867

LICENSE RENEWAL APPLICATION DUE  
DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT  
FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispenser

4/5 - 10/3

LICENSE FEE: \$1,250.00

1103

CITY / BOROUGH: Skagway  
Skagway

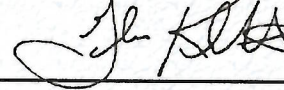
D/B/A: Olivia's at the Skagway Inn  
655 Broadway

Mail Address:  
Historic Skagway Inn LLC  
PO Box 500  
Skagway, AK 99840

This license cannot be transferred without permission  
of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE  
ALCOHOLIC BEVERAGE CONTROL BOARD



DIRECTOR

04-900 (REV 9/09)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

5/03/2021

ABC BOARD

**LIQUOR LICENSE**  
**2021 - 2022**

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Skagway

This license cannot be transferred without permission  
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[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE  
ALCOHOLIC BEVERAGE CONTROL BOARD

**COPY**  
DIRECTOR

D/B/A: Olivia's at the Skagway Inn  
655 Broadway

Mailing Address:  
Historic Skagway Inn LLC  
PO Box 500  
Skagway, AK 99840

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

04-900 (REV 9/09)



Alaska Alcoholic Beverage Control Board

## Master Checklist: Renewal Liquor License Application

Doing Business As:	Olivia's at the Skagway Inn	License Number:	3867
License Type:	Beverage Dispensary - Tourism Seasonal		
Examiner:	Kristina S.	Transaction #:	100033571

Document	Received	Completed	Notes
AB-17: Renewal Application	1/4	5-3-2021	Postmarked by 12/31
App and License Fees	1/4	5-3-2021	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement	1/4	5-3-2021	
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation	1/4	N/A	approved 2020 AB-29 already on file
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 checked="" type="checkbox"/>	<input 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: City & Borough of Skagway

LGB 2 Response:

☐ Waive ☐ Protest ☐ Lapsed ☐ Waive ☐ Protest ☐ Lapsed





## 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):	Historic Skagway Inn, LLC	License #:	3867
License Type:	Beverage Dispensary, Tourism, Seasonal		
Doing Business As:	Olivia's at the Skagway Inn		
Premises Address:	655 Broadway, Skagway, AK 99840		
Local Governing Body:	Municipality of Skagway		
Community Council:			

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

Mailing Address:					
City:		State:		ZIP:	

**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:	Karl E. Klupar	Contact Phone:	610-745-1859
Contact Email:	owner@skagwayinn.com		

**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:	Rosemary V. Libert	Contact Phone:	484-433-0465
Contact Email:	owner@lynch-kennedy.com		

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

**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 #:	62866D
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**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 any type *including non-profit* must list **ONLY** the following:
  - 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
  - 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:	Karl E. Klupar				
Title(s):	Member	Phone:	610-745-1859	% Owned:	50
Mailing Address:	PO Box 3				
City:	Skagway	State:	AK	ZIP:	99840

Name of Official:	Rosemary V. Libert				
Title(s):	Member	Phone:	484-433-0465	% Owned:	50
Mailing Address:	PO Box 3				
City:	Skagway	State:	AK	ZIP:	99840

Name of Official:	N/A				
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

AMCC

JAN - 4 2021

**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 <b>regularly operated continuously</b> throughout each year. (Year-round)  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 2. The license was <b>only operated during a specific season</b> each year. (Seasonal)<br><i>If your operation dates have changed, list them below:</i><br>_____ to _____   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.<br><i>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 4. 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. <i>A complete 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.</i> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

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**

Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020?

Yes ☐ No ☒

If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)

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

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# Alaska Alcoholic Beverage Control Board

## 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 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 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.

*Karl E. Klupar*

Signature of licensee  
Karl E. Klupar

Commonwealth of Pennsylvania-Notary Seal  
Jimmy Du, Notary Public  
Delaware County  
My Commission Expires November 13, 2023  
Commission Number 1357148

*Jimmy Du*  
Signature of Notary Public

Printed name of licensee

Notary Public in and for the State of: Pennsylvania

My commission expires: 11/13/2023

Subscribed and sworn to before me this 31<sup>st</sup> day of December, 2020.

**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:	\$	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$

AMCO

JAN - 4 2021





Alaska Alcoholic Beverage Control Board

## Form AB-29: Waiver of Operation Application

### What is this form?

This form is the means by which a licensee may request that the Alcoholic Beverage Control (ABC) Board waive the operating requirement of AS 04.11.330(a)(3) or (d). If a recreational site license has not been operated at least once in a calendar year, or if a license of any other type has not been operated for at least 240 hours in a calendar year, then a complete copy of this form and the corresponding fees must be submitted for that calendar year, per 3 AAC 304.170.

This application must be accompanied by a non-refundable waiver application fee of:

- for a 1<sup>st</sup> request, an amount equal to  $\frac{1}{2}$  the applicable biennial license fee; or
- for a 2<sup>nd</sup> or subsequent request, double the amount of the fee paid for the previous waiver application.

The ABC Board will determine whether, through no fault of the licensee or because the premises are under construction, the licensed premises could not be operated for the required time during the calendar year. The ABC Board may impose conditions along with the approval of an application for waiver, and it may deny a third or subsequent application for waiver. If an application for waiver is denied, an application for license renewal for the succeeding license period will be denied by the Board. In addition to the waiver application fee, the applicant must pay a late fee of \$1,000 for an application that is received too late for Board consideration at its meeting before November 30 of the year for which the waiver is requested. Please check AMCO's website for meeting agenda deadlines.

Please note that a licensee must submit a separate completed copy of this form and pay a separate corresponding fee for each license and for each calendar year during which a license was not operated in compliance with AS 04.11.330.

### Section 1 – Establishment Information

Enter information for the license that has not been operated for the time required under AS 04.11.330.

Licensee:	Historic Skagway Inn, LLC	License Number:	3867		
License Type:	Beverage Dispensary - Tourism Seasonal				
DBA:	Olivia's at the Skagway Inn				
Premises Address:	655 Broadway				
City:	Skagway	State:	Alaska	ZIP:	99840
Local Governing Body:	Municipality of Skagway				

### Section 2 – Request Number and Calendar Year

☒ 1<sup>st</sup> Request      ☐ 2<sup>nd</sup> Request      ☐ 3<sup>rd</sup> Request      ☐ Other \_\_\_\_\_

Request for Calendar Year 2020



Alaska Alcoholic Beverage Control Board

**Form AB-29: Waiver of Operation Application**

**Section 3 – Reason for Non-operation**

Provide an explanation as to why the licensed premises were not operated:

The seasonal license is valid from 4/5 - 10/3. The operation was initially closed by State of Alaska mandate. Later the mandate was reduced to 50% occupancy. Making profitable operation untenable. Also the initial closure of the Port of Vancouver, BC CANADA was extended past the normal cruise operating season. The Vancouver port being closed to cruise ships cancelled the tourist port calls to Skagway, Alaska. As a result there were no tourists visiting Skagway to serve alcoholic beverages too, and "Olivia's at the Skagway Inn" was not able to operate for the required time during calendar year 2020.

**Section 4 – Certifications**

The following must be completed for establishments located within the boundaries of a local governing body:

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

Initials

I certify that I will provide a true copy of this application to the local governing body listed on Page 1 of this form prior to ABC Board consideration of this application.



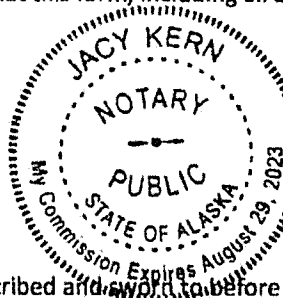
As a liquor licensee, I declare under penalty of perjury that this form, including all attachments, is true, correct, and complete.

*Karl E. Klupar*

Signature of licensee

Karl E. Klupar, Managing Member

Printed name of licensee



*Jacy Kern*  
Notary Public in and for the State of Alaska.

My commission expires: August 29, 2023

Subscribed and sworn to before me this 24 day of September, 2020.

**Office Use Only**

Waiver Application Fee:		Late Fee:		Transaction #:	
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THE STATE  
of **ALASKA**  
GOVERNOR MIKE DUNLEAVY

**Department of Commerce,  
Community,  
and Economic Development**

**ALCOHOL & MARIJUANA CONTROL OFFICE**

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

September 24, 2020

Historic Skagway Inn LLC  
P.O. Box 500  
Skagway, AK 99603

Re: Olivia's at the Skagway Inn, License #99840

Dear Olivia's at the Skagway Inn:

On November 13, 2017 the Alcoholic Beverage Control Board delegated the authority to approve first and second requests to waive the statutory minimum operating requirements to the Director.

Please consider this notice that I have approved your waiver of operation for the 2020 calendar year.

Please ensure that if you are operating solely to meet minimum operating requirements in the future, you address the items required in 3 AAC 304.170(j) to prove your operations to the board.

Please contact [alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov) with any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Carrie Craig".

Carrie Craig  
Records and Licensing Supervisor

cc: License File

AMCC

JAN - 4 2021



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	HISTORIC SKAGWAY INN, LLC

Entity Type: Limited Liability Company

Entity #: 62866D

Status: Good Standing

AK Formed Date: 1/22/1998

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: PO BOX 500, SKAGWAY, AK 99840-0500

Entity Physical Address: 655 BROADWAY, SKAGWAY, AK 99840-0500

Registered Agent

Agent Name: Karl Kluper

Registered Mailing Address: PO BOX 3, SKAGWAY, AK 99840

Registered Physical Address: 350 BROADWAY, SKAGWAY, AK 99840

Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	Karl Kluper	Member	50.00
	Rosemary V Libert	Member	50.00

## Filed Documents

Date Filed	Type	Filing	Certificate
1/22/1998	Creation Filing	<a href="#">Click to View</a>	
4/13/1998	Biennial Report		
4/13/1998	Initial Report	<a href="#">Click to View</a>	
2/06/2001	Biennial Report	<a href="#">Click to View</a>	
1/04/2002	Biennial Report	<a href="#">Click to View</a>	
7/01/2004	Biennial Report	<a href="#">Click to View</a>	
12/29/2006	Biennial Report	<a href="#">Click to View</a>	
7/21/2011	Admin Dissolution		<a href="#">Click to View</a>
8/26/2011	Reinstatement	<a href="#">Click to View</a>	<a href="#">Click to View</a>
8/26/2011	Biennial Report	<a href="#">Click to View</a>	
8/26/2011	Biennial Report	<a href="#">Click to View</a>	
12/28/2012	Biennial Report	<a href="#">Click to View</a>	
5/30/2014	Biennial Report	<a href="#">Click to View</a>	
4/04/2016	Biennial Report	<a href="#">Click to View</a>	
4/16/2018	Biennial Report	<a href="#">Click to View</a>	
12/31/2019	Biennial Report	<a href="#">Click to View</a>	

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Department of Commerce, Community, and Economic Development

DIVISION OF CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #266933

LICENSE DETAILS

License #: 266933

Print Business License

Business Name: HISTORIC SKAGWAY INN LLC

Status: Active

Issue Date: 04/20/1998

Expiration Date: 12/31/2022

Mailing Address: PO BOX 500  
SKAGWAY, AK 99840

Physical Address: 655 BROADWAY  
SKAGWAY, AK 99840

Owners

HISTORIC SKAGWAY INN LLC

Activities

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	

Endorsements

No Endorsements Found

License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

Start Date	End Date
------------	----------



Start Date	End Date
1/1/2019	1/17/2019
1/1/2021	1/16/2021

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