

Department of Commerce, Community, and Economic Development

ALCOHOL AND MARIJUANA CONTROL OFFICE 550 West 7th Avenue, Suite 1600 Anchorage, AK 99501 Main: 907.269.0350

MEMORANDUM

TO: Alcoholic Beverage Control Board DATE: January 5, 2022

FROM: Kristina Serezhenkov, OLE RE: #52 American Legion Post #3

Requested Action:

Renewal; transfer of ownership; evaluation of the public interest under AS

04.11.360(1) and 3 AAC 304.180

Statutory and Regulatory Authority:

AS 04.06.090(b): "The board shall review all applications for licenses made under this title and may order the director to issue, renew, revoke, transfer, or suspend licenses and permits authorized under this title."

AS 04.11.040(a): "A license issued under this title may not be transferred to another person except with the written consent of the board."

3 AAC 304.180. Denial, suspension, revocation, or refusal to renew or transfer, in the public interest: "(a) The factors the board will, in its discretion, consider in determining whether it is in the public interest to deny, revoke, suspend, or refuse to renew or transfer a license include

- (1) the applicant's, the applicant's affiliates', the transferee's, or the transferee's affiliates' histories of commission of
 - (A) an act that constitutes a crime involving moral turpitude;
 - (B) a violation of AS 04 or regulations adopted by the board; a violation of the alcoholic beverage control laws of another state, as a licensee of that state; or
 - (C) a felony in this state, the United States, or another state or territory during the 10 years immediately preceding the date of application;
- (2) whether the applicant, the applicant's affiliates, the transferee, or the transferee's affiliates are untrustworthy, unfit to conduct a licensed business, or a potential source of harm to the public;"

Staff Rec.:

Evaluate the public interest under AS 04.11.360(1) and approve the renewal with

delegation.

Background: This is an application for renewal of a Club license #52 American Legion Post #3 owned by Joseph T Craig Post No 3 The American Legion Inc. This non-profit entity had a change of members in June of 2021 in which Mr. Weston was added as the Vice President. AMCO was not timely notified of this change and it was noticed with the renewal application received 12/1/2021 which also included the AB-08a and a letter of explanation from Mr. Weston.

The criminal history record check for Michael Weston has not yet been received. Mr. Weston provided a written explanation.

Attachment: AB-08a: Authorization of Records Release

AB-17 Renewal Application

Confidential Written Explanation - provided separately Confidential Character Reference - provided separately Confidential Correspondence - provided separately



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

Form AB-08a: Authorization of Records Release

What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the applicant and the applicant's spouse.
- If the applicant is a <u>corporation</u>, this form must be completed for each *stockholder 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 <u>limited liability organization</u>, this form must be completed for each *member with an ownership interest of* 10% or more, and for each *manager*.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, this form must be completed for each <u>partner with an interest</u> of 10% or more, and for each <u>general partner</u>.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

Section 1 - Establishment Information Enter information for licensed establishment. 20 Licensee: Joseph T Craig Post 3,/American Legion License Number: 52 License Type: club **Doing Business As:** Joseph T Craig Post-3, American Legion **Premises Address:** 631 Park Ave ZIP: State: 99901 City: Ketchikan AK

	Section 2 – Individual Information
Enter information for t	he individual licensee or affiliate.
Name:	Michael Weston
Title:	Vice President
Date of Birth:	



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

Form AB-08a: Authorization of Records Release

	Section 3 – Certifications and Approvals	
Read each line below, and the	en sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have never beer	n convicted of a violation of AS 04 or regulations adopted by the ABC Board.	76
I certify that I have never been as a licensee of that state.	n convicted of a violation of the alcoholic beverage control laws of another state,	NS
I certify that I have not been coincluding a suspended impositi	onvicted of a felony in this state, the United States, or another state or territory, ion of sentence, during the 15 years immediately preceding the date of this form.	
I have been convicted of one of	ing statement only if you are unable to certify one or more of the above statements: or more of the above offenses, and I have attached a written explanation that includes would be in the public interest for the ABC Board to approve me as a licensee.	Initials
Alaska Alcoholic Beverage Cont B AAC 304.105. I understand th Investigation (FBI), and that I ha	is form, I am providing written authorization for release of my conviction and arrest records trol Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and not my fingerprints will be used to check the criminal history records of the Federal Bureau cave the opportunity to complete or challenge the accuracy of the information contained in the adures for obtaining a change, correction, or updating an FBI identification record are set for	of the FBI
declare under penalty of perju	ury that this form, including all attachments and accompanying schedules and statements, is	s true,
Signature of licensee/affiliate	Signature of Notary Public	W
Michael Leston Printed name of licensee/affilia	Notary Public in and for the State of	<u> </u>
State of Alaska	My commission expires: 12.22	2024
OTARY PUBLIC Allison Tacker ommission Expires Dec 22, 2024	Subscribed and sworn to before me this 23 day of November	_ 20 <u>21</u> .



[Form AB-17] (rev09/21/2021)

Aicohol and Marijuana Control Office 550 W 7th Avenue, Sulte 1600 Anchorage, AK 99501

aicchol.licensing@alaska.gov https://www.commerce_alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-17: 2022/2023 General Renewal Application

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 per AS 04.11.270, 3 AAC 304.150, 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 02/28/2022 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):	Joseph T Craig Post N.	3, The	American	License #:	52
License Type:	Club	L	ON ION IT	C	
Doing Business As:	AMERICAN LEGION	POST	#3		
Premises Address:	631 Park Ave				
Local Governing Body:	City of Ketchikan (Ketchil	kan Gate	way Boroug	h)	
Community Council:					- · · · · · · · · · · · · · · · · · · ·
your mailing address ha	as changed, write the NEW addres	s below:			
Mailing Address:	POB 5121				· · · · · · · · · · · · · · · · · · ·
City:	Ketchikan	State:	AK	ZIP	: 99901
ust be listed on CBPL with t	Section 1 – Licensee dividual listed below must be listed in the same name and title. nated point of contact regarding this licensee.	Section 2 or	3 as an Official/Ow	ner/Sharehold	
ist be listed on CBPL with t	dividual listed below must be listed in the same name and title.	Section 2 or	3 as an Official/Ow	ner/Shareholo	
ust be listed on CBPL with t is person will be the design	dividual listed below must be listed in the same name and title. nated point of contact regarding this lice.	Section 2 or	3 as an Official/Ow	ner/Shareholo	d.
ust be listed on CBPL with the is person will be the design Contact Licensee: Contact Email:	dividual listed below must be listed in the same name and title. nated point of contact regarding this lice. Deborah S Davis ktnpost3@kpunet.net	Section 2 or ense, unless	3 as an Official/Ow the Optional cont Contact Pho	ner/Sharehold act is complete ne: 907	d. 7-617-0298
ust be listed on CBPL with the is person will be the design Contact Licensee: Contact Email:	dividual listed below must be listed in the same name and title. nated point of contact regarding this lice. Deborah S Davis	Section 2 or ense, unless	3 as an Official/Ow the Optional cont Contact Pho	ner/Sharehold act is complete ne: 907	d. 7-617-0298
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ust be listed on CBPL with to its person will be the design Contact Licensee: Contact Email: ptional: If you wish for AMCO Name of Contact: Contact Email:	dividual listed below must be listed in the same name and title. nated point of contact regarding this lice. Deborah S Davis ktnpost3@kpunet.net	Section 2 or ense, unless	3 as an Official/Ow the Optional cont Contact Phos stact Licensee about Contact Phos	your license, list	d. 7-617-0298

DEC - 1 282) Page 1 of 4



Form AB-17: 2022/2023 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 #: 993D

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:
 - 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 any type must list ONLY the following:
 - o 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:
 - o Each Partner with an interest of 10% or more
 - o All General Partners regardless of percentage owned

<u>Important Note</u>: 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. <u>If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.</u>

Name of Official:	Daniel Jones					
Title(s):	President	Phone:	907-225-2021	% Ow	ned:	0
Mailing Address:	POB 5121					
City:	Ketchikan	State:	AK	ZIP:	999	901

Name of Official:	Deborah S Davis	•		vanue a d'a	
Title(s):	Treasurer/Secretary	Phone:	907-617-0298	% Owr	ned:
Mailing Address:	POB 5121				
City:	Ketchikan	State:	AK	ZIP:	99901

Name of Official:	Michael Weston				
Title(s):	Vice President	Phone:	907-225-2021	% Owne	ed: ()
Mailing Address:	POB 5121				
City:	Ketchikan	State:	AK	ZIP:	99901

AMCO



Form AB-17: 2022/2023 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 #: 993D

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The <u>only exception</u> 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
 - 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:
 - o 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:
 - o 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:	James L VanHorn				1
Title(s):	Director	Phone:	907-225-2021	% Owi	ned: 0
Mailing Address:	POB 5121				
City:	Ketchikan	State:	AK	ZIP:	99901

Name of Official:	Jeremiah Sullivan					
Title(s):	Director	Phone:	907-225-2021	% Ow	ned:	0
Mailing Address:	POB 5121					
City:	Ketchikan	State:	AK	ZIP:	999	901

Name of Official:	Scott Kline				
Title(s):	Director	Phone:	907-225-2021	% Own	ed: 0
Mailing Address:	POB 5121	-			
City:	Ketchikan	State:	AK	ZIP:	99901

AMCO

addl



Form AB-17: 2022/2023 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:					L		
City:			State:		ZIP:		
Email:							
This individual is an:	Applicant	Affiliate					
Name:				Contact Phone:			
Mailing Address:						. 1	
City:		2 Marin 2 Mari	State:		ZIP:		
Email:				1			
2. The license was only op If your operation dates 3. The license was only op A complete AB-30: Proc. 4. The license was not ope	erated during a speci have changed, list the erated to meet the mi of of Minimum Operaterated at all or was no	fic season each year. (Season below: to inimum requirement of 24 tion Checklist, and all docu	onal) O total hours each calenimentation must be proving minimum requirement c	vided with this form. of 240 total			
				non Application which the license was not operated	<u>d.</u>		Ш
		of hours of operation in a marked "OTHER" and CO		are not required to pay the fees on.	, however a		
	Se	ction 5 – Viol	ations and (Convictions			
convicted of a violation	of Title 04, 3AAC	304 or a local ordina	ance adopted unde	entity in this application be r AS 04.21.010 in 2020 or 20 on and/or Convictions per	021?	Yes	No 🗸

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

AMCO

[Form AB-17] (rev09/21/2021) DEC - 1 2021 Page 3 of 4



Form AB-17: 2022/2023 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.

Signature of licensee

Deborah S Davis

Printed name of licensee

SEAL OF THE	Official Seal //	11/
	Notary Public-State of Alaska use of N	lotary Public
	My Comm. Expires Notary Public 25,202 for the State	MHEVI
ALASA	Trotaly January Milaturgor the State	01. 1/01/01

My commission expires:

bscribed and sworn to before me this 29 day of NOVENBER

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
Common Carrier applications must include a current safety inspection certificate

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:	\$1200.00	Application Fee:	\$ 300.00	Misc. Fee:	\$ 96.50
	Total Fees Due:				

AMCO

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	Joseph T Craig, Post No. 3, The American Legion, Inc
Previous Legal Name	AMERICAN LEGION, INC. KETCHIKAN POST NO. 3

Entity Type: Nonprofit Corporation

Entity #: 993D

Status: Good Standing

AK Formed Date: 4/9/1935

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2023

Entity Mailing Address: P.O. BOX 5121, KETCHIKAN, AK 99901

Entity Physical Address: 631 PARK AVENUE, KETCHIKAN, AK 99901

Registered Agent

Agent Name: Deborah Davis

Registered Mailing Address: PO BOX 5121, KETCHIKAN, AK 99901

Registered Physical Address: 631 PARK AVE, KETCHIKAN, AK 99901

Officials

			□Show Former
AK Entity #	Name	Titles	Owned
	DANIEL JONES	President	
	Deborah Davis	Secretary, Treasurer	

AK Entity #	Name	Titles	Owned
	James VanHorn	Director	
	JEREMIAH SULLIVAN	Director	
	MICHAEL WESTON	Vice President	
	Scott Kline	Director	

Filed Documents

Date Filed	Туре	Filing	Certificate
4/09/1935	Creation Filing		
6/30/1987	Biennial Report		
5/12/1989	Biennial Report		
5/30/1991	Biennial Report		
5/25/1993	Biennial Report	Click to View	
5/19/1995	Biennial Report	Click to View	
6/16/1997	Biennial Report	Click to View	
6/16/1999	Biennial Report	Click to View	
7/05/2001	Biennial Report	Click to View	
7/09/2003	Biennial Report	Click to View	
3/24/2008	Biennial Report	Click to View	
3/24/2008	Biennial Report	Click to View	
4/02/2010	Biennial Report	Click to View	
9/07/2012	Biennial Report	Click to View	
9/07/2012	Agent Change	Click to View	
6/30/2013	Biennial Report	Click to View	
7/09/2014	Amendment	Click to View	Click to View
6/29/2015	Biennial Report	Click to View	
5/13/2017	Biennial Report	Click to View	
4/13/2018	Agent Change	Click to View	
4/13/2018	Change of Officials	Click to View	
2/26/2019	Change of Officials	Click to View	
4/22/2019	Biennial Report	Click to View	
6/22/2021	Biennial Report	Click to View	

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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 #23294

LICENSE DETAILS

License #: 23294

Print Business License

Business Name: AMERICAN LEGION #3

Status: Active

Issue Date: 12/08/1998

Expiration Date: 12/31/2023

Mailing Address: PO BOX 5121

KETCHIKAN, AK 99901

Physical Address: 631 PARK AVE

KETCHIKAN, AK 99901

Owners

JOSEPH T CRAIG, POST NO. 3, THE AMERICAN LEGION, INC

Activities

Line of Business	NAICS	Professional License #
81 - Services	813410 - CIVIC AND SOCIAL ORGANIZATIONS	

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.

No Lapses on record for the last 4 years.

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 01/04/2022 ABC BOARD **LIQUOR LICENSE 2022 - 2023**

TEMPORARY

52

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Club

LICENSE FEE: \$1,200.00

1110

D/B/A: American Legion Post #3

631 Park Avenue

Mail Address:

Joseph T Craig Post No 3 The American Legion i

PO Box 5121

Ketchikan, AK 99901

CITY / BOROUGH: Ketchikan

Ketchikan Gateway Borough

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

JE LILA DIRECTOR

04-900 (REV 7/21)

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 01/04/2022 ABC BOARD LIQUOR LICENSE

2022 - 2023

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

52

TEMPORARY

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Club

LICENSE FEE: \$1,200.00

CITY / BOROUGH: Ketchikan

Ketchikan Gateway Borough

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

COPY

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 7/21)

D/B/A:

American Legion Post #3 631 Park Avenue

Mailing Address:

Joseph T Craig Post No 3 The American Legion Irc

PO Box 5121

Ketchikan, AK 99901