Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
https://www.commerce.alaska.gov/web/amco
Phone: 907.269.0350

Alaska Marijuana Control Board

Form MJ-09: Statement of Financial Interest

What is this form?

A statement of financial interest completed by each proposed licensee (as defined in 3 AAC 306.020(b)(2)) and affiliate (as defined in 3 AAC 306.990(a)(1)) is required for all marijuana establishment license applications, per 3 AAC 306.020(b)(4). A person other than a licensee may not have direct or indirect financial interest (as defined in 3 AAC 306.015(e)(1)) in the business for which a marijuana establishment license is issued, per 3 AAC 306.015(a).

This form must be completed and submitted to AMCO's main office by each proposed licensee or affiliate before any license application will be considered complete.

Section 1 – Establishment Information

Enter information for the business seeking to be licensed, as identified on the license application.

Licensee:	Ryan Hallsten; Charles Hnilicka III	**License Number:**	13329		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	R.C.H. Cultivation				
Premises Address:	2745 Hanson Road. Unit A.				
City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Charles Robert Hnilicka III
Title:	Partner
[redacted]	[redacted]

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Form MJ-09: Statement of Financial Interest

Section 3 – Certifications

I certify that no person other than a proposed licensee listed on my marijuana establishment license application has a direct or indirect financial interest, as defined in 3 AAC 306.015(e)(1), in the business for which a marijuana establishment license is being applied for.

I further certify that any ownership change shall be reported to the board as required under 3 AAC 306.040.

I declare under penalty of perjury that I have examined this form, including all accompanying schedules and statements, and to the best of my knowledge and belief find it to be true, correct, and complete.

Signature of licensee/affiliate

Charles R. Hnilicka III

Printed name

Subscribed and sworn to before me this 14 day of July, 2017.

Michoeh K. Ahseln

Notary Public in and for the State of Alaska.

My commission expires: July 12, 2018

MICHOEH K. AHSELN NOTARY PUBLIC STATE OF ALASKA

RECEIVED JUL 26 2017 ALCOHOL MARIJUANA CONTROL OFFICE STATE OF ALASKA

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City:	Fairbanks	**State:**	AK	**ZIP:**	99709

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Ryan Allen Hallsten
Title:	Partner
SSN:	[redacted]

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Signature of licensee/affiliate

Ryan A. Hallsten

Printed name

Subscribed and sworn to before me this 19th day of July, 2017.

Michoeh K. Ahsein

Notary Public in and for the State of Alaska.

My commission expires: July 12, 2018

MICHOEH K. AHSELN NOTARY PUBLIC STATE OF ALASKA

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