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-20: Renewal Application Certifications

What is this form?

This renewal application certifications form is required for all marijuana establishment license renewal applications. Each person signing an application for a marijuana establishment license must declare that he/she has read and is familiar with AS 17.38 and 3 AAC 306. 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 licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1 – Establishment Information

Enter information for the licensed establishment, as identified on the license application.

Licensee:	CHRISTOPHER T FARRIS; CALEB L SAUNDERS; BAILEY A STUART	**License Number:**	10008		
License Type:	Retail Marijuana Store				
Doing Business As:	GREEN JAR				
Premises Address:	4901 E Blue Lupine dr , Bldg 2, Unit E				
City:	Wasilla	**State:**	AK	**ZIP:**	99654

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Christoper T Farris
Title:	Chief Financial Officer

Section 3 – Changes to Licensed Marijuana Establishment

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

I certify that **no changes have been made**, except for those that have been previously reported or requested on a form prescribed by the Board, to this licensed establishment's business name, ownership, licensed premises diagram, or operating plan, and (for marijuana product manufacturers) that I do not wish to request Board approval for production of any new proposed marijuana products. CTF

I certify that **a change has been or will be made** to one or more of the items listed above for this establishment, and I understand that an additional form(s) and fee(s) must be submitted to AMCO before any renewal application for this license can be considered complete.

If you have selected the second certification, please list any and all of the five types of changes that need to be reported/requested:

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Alaska Marijuana Control Board

Form MJ-20: Renewal Application Certifications

Section 4 – Certifications

Read each line below, and then sign your initials in the box to the right of any applicable statements: Initials

I certify that I have **not** been convicted of any criminal charge in the previous two calendar years. CTF

I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.

Sign your initials to the following statement only if you are unable to certify one or both of the above statements: Initials

I have attached a written explanation for why I cannot certify one or both of the above statements, which includes the type of offense, as required under 3 AAC 306.035(b)(4). CTF

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

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

I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state. CTF

I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board. CTF

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued. CTF

As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

Christopher Farris
Printed name of licensee

Official Seal
Robert H. Smith
Notary Public-State of Alaska
My Comm. Expires 11/09/2020

Notary Public in and for the State of Alaska

My commission expires: 11/09/2020

Subscribed and sworn to before me this 23 day of June, 2017.

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STATE OF ALASKA

GREEN JAR

4901 E. Blue Lupine Dr. Wasilla, AK 99654 | 907-631-3800

June 22nd, 2016

Alcohol & Marijuana Control Office,

I cannot initial that I have not violated any civil laws during my 2016-2017 licensing period. On February 7th, 2017, the state of Alaska deemed that to carry CBD products was in violation of our delegated license, at that time. The MCB decided not to take any further action on the NOV given to us.

Christopher T. Farris

Chief Financial Officer

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Doing Business As:	GREEN JAR				
Premises Address:	4901 E Blue Lupine dr , Bldg 2, Unit E				
City:	Wasilla	**State:**	AK	**ZIP:**	99654

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Caleb L Saunders
Title:	Chief Executive Officer

Section 3 – Changes to Licensed Marijuana Establishment

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

I certify that **no changes have been made**, except for those that have been previously reported or requested on a form prescribed by the Board, to this licensed establishment's business name, ownership, licensed premises diagram, or operating plan, and (for marijuana product manufacturers) that I do not wish to request Board approval for production of any new proposed marijuana products.

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I certify that I have **not** committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.

Sign your initials to the following statement only if you are unable to certify one or both of the above statements: Initials

I have attached a written explanation for why I cannot certify one or both of the above statements, which includes the type of offense, as required under 3 AAC 306.035(b)(4).

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I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.

I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.

I certify that I understand that providing a false statement on this form, the online application, or any other form provided by or to AMCO is grounds for rejection or denial of this application or revocation of any license issued.

As an applicant for a marijuana establishment license renewal, I declare under penalty of unsworn falsification that I have read and am familiar with AS 17.38 and 3 AAC 306, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Marijuana Control Board in support of this application and understand that failure to do so by any deadline given to me by AMCO staff may result in additional fees or expiration of this license.

Signature of licensee

Caleb L. Saunders
Printed name of licensee

Official Seal
Robert H. Smith
Notary Public-State of Alaska
My Comm. Expires 11/09/2020

Notary Public in and for the State of Alaska

My commission expires: 11/09/2020

Subscribed and sworn to before me this 23 day of June, 2017.

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GREEN JAR

4901 E. Blue Lupine Dr. Wasilla, AK 99654 | 907-631-3800

June 22nd, 2016

Alcohol & Marijuana Control Office,

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Caleb L. Saunders

Chief Executive Officer

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City:	Wasilla	**State:**	AK	**ZIP:**	99654

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.

Name:	Bailey A Stuart
Title:	Chief Operations Officer

Section 3 – Changes to Licensed Marijuana Establishment

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Signature of licensee

Bailey Stuart
Printed name of licensee

Official Seal
Robert H. Smith
Notary Public-State of Alaska
My Comm. Expires 11/09/2020

Notary Public in and for the State of Alaska

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Bailey A. N. Stuart

Chief Opperations Officer

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