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:	Alaska Frontier Cannabis, LLC	**License Number:**	14396		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Alaska Frontier Cannabis, LLC				
Premises Address:	6570 W Trevett Cir, Suite C				
City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Robert Allen Hosey Mays III
Title:	Managing member
SSN:	[redacted]

RECEIVED
FEB 12 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA

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

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.

Bob Mays III
Signature of licensee/affiliate

Robert Allen Hosey Mays III
Printed name

Subscribed and sworn to before me this 12th *day of* February, 20 18.

Notary Public
MEGAN N. LEGGETT
State of Alaska
My Commission Expires Aug. 30, 2021

Megan N. Leggett
Notary Public in and for the State of Alaska.

My commission expires: 08/30/2021

RECEIVED
FEB 12 2018
ALCOHOL MARIJUANA CONTROL OFFICE
STATE OF ALASKA