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:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Terry Hennessey | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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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 understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record.
*The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Angela C Miller
Notary Public in and for the State of Alaska

Terry Lee Hennessey
Printed name of licensee

My commission expires: 9.11.20

Subscribed and sworn to before me this 21 day of March, 20 20.

STATE OF ALASKA
NOTARY PUBLIC
Angela C. Miller
My Commission Expires Sep 11, 2020

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

**What is this form?**

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## Section 1 – Establishment Information

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

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|---|---|---|---|---|---|
| **Licensee:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Darcy Holt | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Anchorage, AK 99501
marijuana.licensing@alaska.gov
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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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Darcy P Holt
Printed name of licensee

WALKER SEXTON
My Commission Expires
NOTARY PUBLIC
Aug. 21, 2021
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: Aug 21, 2021

Subscribed and sworn to before me this 21st day of March, 2018.

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).

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## Section 1 – Establishment Information

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|---|---|---|---|---|---|
| **Licensee:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Jordan Huss | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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**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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Jordan C. Huss
Signature of licensee

Jordan C. Huss
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 11/19/2018

Subscribed and sworn to before me this 20th day of March, 2018.

STATE OF ALASKA
NOTARY PUBLIC
Michael Cassel
My Commission Expires: November 19, 2018

Alcohol and Marijuana Control Office
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Anchorage, AK 99501
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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).

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## Section 1 – Establishment Information

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

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|---|---|---|---|---|---|
| **Licensee:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Louis John Kuest | | |
| **Title:** | Shareholder of Smart Capital Holdings, LLC (Single-Member LLC) | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

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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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

KARISSA SLEPPY
My Commission Expires
NOTARY PUBLIC
Jan. 23, 2022
STATE OF ALASKA

Notary Public in and for the State of Alaska

JOHN KUEST
Printed name of licensee

My commission expires: Jan 23, 2022

Subscribed and sworn to before me this 3 day of April, 2018.

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

**What is this form?**

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## Section 1 – Establishment Information

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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Allyson Parker-Lauck | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Allyson Parker-Lauck
Signature of licensee

Allyson Parker-Lauck
Printed name of licensee

Brenda Batzner
Notary Public in and for the State of Alaska

My commission expires: 6/1/20

Subscribed and sworn to before me this 27th day of March, 2018.

"Official Seal"
Notary Public
Brenda Batzner
State Of Alaska
Commission # 160601005 Exp: 6/1/20

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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marijuana.licensing@alaska.gov
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

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## Section 1 – Establishment Information

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

| | | | | | |
|---|---|---|---|---|---|
| **Licensee:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Terry Lauck | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 6/1/20

Subscribed and sworn to before me this 27th day of March, 2018.

"Official Seal"
Notary Public
Brenda Batzner
State Of Alaska
Commission # 160601005 Exp: 6/1/20

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**Alaska Marijuana Control Board**

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## Section 1 – Establishment Information

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

| | | | | | |
|---|---|---|---|---|---|
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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Janica Liland | | |
| **Title:** | Shareholder of Birch Clearing Holdings, LLC (Single-Member LLC) | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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Phone: 907.269.0350

**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

## Section 3 – Certifications

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

KARISSA SLEPPY
My Commission Expires
NOTARY PUBLIC
Jan. 23, 2022
STATE OF ALASKA

Notary Public in and for the State of Alaska

JANICA LILAND
Printed name of licensee

My commission expires: Jan 23, 2022

Subscribed and sworn to before me this 2 day of April, 2018.

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.

| | | | | | |
|---|---|---|---|---|---|
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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Gerardo Martinez | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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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.

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Gerardo D. Martinez
Printed name of licensee

MIRANDA HONEST
My Commission Expires
NOTARY PUBLIC
Jul 21, 2019
STATE OF ALASKA

Miranda Honest
Notary Public in and for the State of Alaska

My commission expires: 7/21/19

Subscribed and sworn to before me this 27 day of March, 2018.

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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# Form MJ-09: Statement of Financial Interest

**What is this form?**

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## Section 1 – Establishment Information

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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Carla Mason | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

Alcohol and Marijuana Control Office
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**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Carla Mason
Signature of licensee

Brooke Skjold
Notary Public in and for the State of Alaska

Carla Mason
Printed name of licensee

My commission expires: 8-9-19

Subscribed and sworn to before me this 23rd day of March, 2018.

BROOKE SKJOLD
My Commission Expires
NOTARY PUBLIC
Aug 9, 2019
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

**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:** | Great Nothern Cultivation, Inc. | **License Number:** | 10747 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Angela Miller | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

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 understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record.
*The procedures for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34.*

I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Angela C Miller
Signature of licensee

Angela C Miller
Printed name of licensee

Nicola A. Perez
Notary Public in and for the State of Alaska

My commission expires: 7/4/18

Subscribed and sworn to before me this 20 day of March, 20 18.

STATE OF ALASKA
NOTARY PUBLIC
Nicola A. Perez
My Commission Expires July 4, 2018

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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Carla Miller | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Carla Miller
Printed name of licensee

Victoria Jackson
Notary Public in and for the State of Alaska

My commission expires: 12/14/19

Subscribed and sworn to before me this 26th day of March, 2019.

STATE OF ALASKA
NOTARY PUBLIC
Victoria Jackson
My Commission Expires: 12/14/19

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| **Premises Address:** | 2341 Cinnabar Loop | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Colt Miller | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Colt Miller
Signature of licensee

Colt Miller
Printed name of licensee

Angela C Miller
Notary Public in and for the State of Alaska

My commission expires: 9.11.20

Subscribed and sworn to before me this 30 day of March, 2018.

STATE OF ALASKA
NOTARY PUBLIC
Angela C. Miller
My Commission Expires Sep 11, 2020

Alcohol and Marijuana Control Office
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| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99507 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Aaron Morse | | |
| **Title:** | Shareholder of Morse Capital, LLC (Single-Member LLC) | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |

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I declare under penalty of unsworn falsification that this form, including all accompanying schedules and statements, is true, correct, and complete.

Signature of licensee

Aaron Munz
Printed name of licensee

CASSIE MARLOVITS
My Commission Expires
NOTARY PUBLIC
Jan. 23, 2022
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: Jan 23, 2022

Subscribed and sworn to before me this 1 day of May, 20 18.

Alcohol and Marijuana Control Office
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## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Morse Capital, LLC | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | AK Entity #10042246 | **Date of Birth:** | 10/10/2016 |

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Signature of licensee

Printed name of licensee

CASSIE MARLOVITS
My Commission Expires
NOTARY PUBLIC
Jan. 23, 2022
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: Jan 23, 2022

Subscribed and sworn to before me this 1 day of May, 2018.