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:** | Murder Lake, LLC | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | AK Entity #10059404 | **Date of Birth:** | 05/19/2017 |

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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.

Owner of Mudslide LLC
Signature of licensee

Meshera Barnhill
Notary Public in and for the State of Alaska

Michael E Newburg
Printed name of licensee

My commission expires: 4/02/2019

Subscribed and sworn to before me this 12 day of April, 2018.

MESHERA BARNHILL
My Commission Expires
NOTARY PUBLIC
Apr 2, 2019
STATE OF ALASKA

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

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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:** | Jacklyn Oney | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **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

Jacklyn Oney
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: MAY 9, 2021

Subscribed and sworn to before me this 26 day of JANUARY, 20 18.

**A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.**

State of California
County of Los Angeles
Subscribed and sworn to (or affirmed) before me on this 26 day of JANUARY, 2018, by JACKLYN ONEY
_____, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.
Signature _____ (Seal)

HAROLD A. UTOMAKILI
COMM. # 2191377
NOTARY PUBLIC • CALIFORNIA
LOS ANGELES COUNTY
Comm. Exp. MAY 9, 2021

Alcohol and Marijuana Control Office
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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).

**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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|---|---|---|---|---|---|
| **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:** | Brian Pike | | |
| **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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*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

Notary Public in and for the State of Alaska

BRIAN PIKE
Printed name of licensee

My commission expires: 12/15/2018

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

STATE OF ALASKA
NOTARY PUBLIC
Karen L. Cassel
My Commission Expires: December 15, 2018

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

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|---|---|---|---|---|---|
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| **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:** | Victoria Rhoades | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **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.

Victoria L. Rhoades
Signature of licensee

Victoria L. Rhoades
Printed name of licensee

DEBORAH OLSON
My Commission Expires
NOTARY PUBLIC
Mar 23, 2019
STATE OF ALASKA

Deborah Olson
Notary Public in and for the State of Alaska

My commission expires: 3/23/19

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

Alcohol and Marijuana Control Office
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Alaska Marijuana Control Board

# Form MJ-09: Statement of Financial Interest

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**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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|---|---|---|---|---|---|
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| **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:** | Victor Rodriguez | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **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

Victor R. Rodriguez
Printed name of licensee

Tabitha Alone
Notary Public in and for the State of Alaska
#170417010

My commission expires: 4/17/2021

Subscribed and sworn to before me this 28 day of March, 2018.

TABITHA ALONE
Notary Public
State of Alaska
My Commission Expires Apr 17, 2021

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
marijuana.licensing@alaska.gov
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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

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:** | Jeffrey Rognes | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **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

Jeff R. Rogers
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 03/16/2019

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

STATE OF ALASKA
NOTARY PUBLIC
Loama F. Sione
My Commission Expires: March 16, 2019

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

**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 | | | | |
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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:** | Kristin Rognes | | |
| **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

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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.

Kristin Rognes
Signature of licensee

Kristin Rognes
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 03/16/2019

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

STATE OF ALASKA
NOTARY PUBLIC
Loama F. Sione
My Commission Expires: March 16, 2019

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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:** | Smart Capital Holdings, LLC | | |
| **Title:** | Shareholder of Great Northern Cannabis, Inc. | | |
| **SSN:** | AK Entity #10049204 | **Date of Birth:** | 01/16/2017 |

Alcohol and Marijuana Control Office
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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

John Kuest

Printed name of licensee

KARISSA SLEPPY
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 3 day of April, 2018.

Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
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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:** | Robert Thompson | | |
| **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

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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: Robert G. Thompson

A. WINSMANN
My Commission Expires
NOTARY PUBLIC
Jun 14, 2019
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: June 14, 2019

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

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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:** | Amy Vail | | |
| **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.

Amy Vail
Signature of licensee

Amy L. Vail
Printed name of licensee

STATE OF ALASKA
NOTARY PUBLIC
Julie Ellison
My Commission Expires July 20, 2018

Notary

My commission expires: 7/20/18

Subscribed and sworn to before me this 20 day of March, 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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**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:** | Morgan Vail | | |
| **Title:** | Shareholder Great Northern Cannabis, Inc. | | |
| **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.

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

MORGAN VAIL
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: Jan 1 2022

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

Notary Public
CHANCE HERNANDEZ
State of Alaska
My Commission Expires Jan. 1, 2022

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?**

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 Northern 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:** | Aileen Vang | | |
| **Title:** | Shareholder of 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.

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

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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

Aileen Vang
Printed name of licensee

MELODY D. FENIKS NOTARY PUBLIC STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: 6/14/2018

Subscribed and sworn to before me this 4th 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.

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

[redacted]



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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

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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

Notary Public in and for the State of Alaska

Brant Miller
Printed name of licensee

My commission expires: 11-19-18

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

M. DI RAMOS NOTARY PUBLIC STATE OF ALASKA



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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
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Phone: 907.269.0350

**Alaska Marijuana Control Board**

# Form MJ-09: Statement of Financial Interest

**What is this form?**

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**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 Northern Cultivation, Inc. | **License Number:** | 17346 | | |
| **License Type:** | Standard Marijuana Cultivation Facility | | | | |
| **Doing Business As:** | Great Northern Cultivation | | | | |
| **Premises Address:** | 7031 Arctic Boulevard | | | | |
| **City:** | Anchorage | **State:** | AK | **ZIP:** | 99518 |

## Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

| | | | |
|---|---|---|---|
| **Name:** | Lawrence J. Wissing | | |
| **Title:** | Shareholder | | |
| **SSN:** | [redacted] | **Date of Birth:** | [redacted] |



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ALCOHOL MARIJUANA CONTROL OFFICE

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Anchorage, AK 99501
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# Form MJ-09: Statement of Financial Interest

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*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

Notary Public in and for the State of Alaska

LAWRENCE J WISSING
Printed name of licensee

My commission expires: 12/15/2018

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

STATE OF ALASKA
NOTARY PUBLIC
Karen L. Cassel
My Commission Expires: December 15, 2018



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SEP 07 2018