Alcohol & 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

Cover Sheet for Marijuana Establishment Applications

What is this form?

This cover sheet **must** be completed and submitted any time a document, payment, or other marijuana establishment application item is emailed, mailed, or hand-delivered to AMCO's main office.

Items that are submitted without this page will be returned in the manner in which they were received.

Section 1 – Establishment Information

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

Licensee:	Absolem's Garden, LLC	**License Number:**	12612		
License Type:	Limited Marijuana Cultivation Facility				
Doing Business As:	ABSOLEM'S GARDEN				
Physical Address:	13247 East Wycoff Drive				
City:	Palmer	**State:**	AK	**Zip Code:**	99645
Designated Licensee:	Lorrie Moffitt				
Email Address:	absolems.garden@gmail.com				

Section 2 – Attached Items

List all documents, payments, and other items that are being submitted along with this page.

Attached Items:	MJ-09 Statement of Financial Interest Lorrie Moffitt Theodore Buzby Samuel Hatfield Darwin Fugate

OFFICE USE ONLY					
Received Date:		Payment Submitted Y/N:		Transaction #:	

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STATE OF ALASKA

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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:	Absolem's Garden, LLC	**License Number:**	12612		
License Type:	Limited Marijuana Cultivation Facilty				
Doing Business As:	Absolem's Garden				
Premises Address:	13247 E Wycoff Dr.				
City:	Palmer	**State:**	AK	**ZIP:**	99645

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Lorrie Ann Moffitt		
Title:	Owner		
SSN:	[redacted]	**Date of Birth:**	[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 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.

Lorrie Ann Moffitt
Signature of licensee

Lorrie Ann Moffitt
Printed name of licensee

NOTARY PUBLIC
SHAUNE E. O'NEIL
STATE OF ALASKA
My Commission Expires June 14, 2021

Shaune O'Neil
Notary Public in and for the State of Alaska

My commission expires: June 14 2021

Subscribed and sworn to before me this 4 day of March, 2018.

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License Type:	Limited Marijuana Cultivation Facilty				
Doing Business As:	Absolem's Garden				
Premises Address:	13247 E Wycoff Dr.				
City:	Palmer	**State:**	AK	**ZIP:**	99645

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Theodore R. Buzby		
Title:	Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

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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

Theodore R. Buzby

Printed name

NOTARY PUBLIC
SHAUNE E. O'NEIL
STATE OF ALASKA
My Commission Expires June 14, 2021

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

Shaune O'Neil

Notary Public in and for the State of Alaska.

My commission expires: June 14 2021

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License Type:	Limited Marijuana Cultivation Facilty				
Doing Business As:	Absolem's Garden				
Premises Address:	13247 E Wycoff Dr.				
City:	Palmer	**State:**	AK	**ZIP:**	99645

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Samuel Leroy Hatfield, Jr.		
Title:	Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

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Signature of licensee/affiliate

Samuel Leroy Hatfield, Jr

Printed name

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Doing Business As:	Absolem's Garden				
Premises Address:	13247 E Wycoff Dr.				
City:	Palmer	**State:**	AK	**ZIP:**	99645

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Darwin Patrick Fugate		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

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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

Darwin Patrick Fugate

Printed name of licensee

NOTARY PUBLIC
SHAUNE E. O'NEIL
STATE OF ALASKA
My Commission Expires June 14, 2021

Shaune O'Neil
Notary Public in and for the State of Alaska
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Subscribed and sworn to before me this 7 day of March, 20 18

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