# **Notice of Violation**

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records Act AS 40.25

Date:

Designated Licensee:

License #/Type:

AMCO Case#:

DBA:

Premises Address:

Mailing Address:

This is a notice to you as licensee that an alleged violation has occurred. If the Marijuana Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

3 AAC 306.805 provides that upon receipt of a Notice of Violation, a licensee may request to appear before the board and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice. A licensee may respond, either orally or in writing, to the Notice.

IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.

\*Please send your response to the address below and include your Marijuana Establishment License Number in your response.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7<sup>th</sup> Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov

**Issuing Investigator:** 

SIGNATURE:

Received by: SIGNATURE:

**Delivered VIA:** 

Date:

## **Department of Revenue**





TAX DIVISION

Robert B. Atwood Building 550 West 7<sup>th</sup> Avenue, Suite 500 Anchorage, Alaska 99501-3566 Main: 907.269.6620 Fax: 907.269.6644

November 15, 2018

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

#### Re: Failure to pay taxes under AS 43.61.010 by licensed marijuana cultivation facilities

Pursuant to Alaska Statutes and Regulations, AS 43.61.030 and 15 AAC 61.020, the Department of Revenue will inform the Marijuana Control Board of licensed cultivators that have failed to pay tax due or file a return as required by law.

As of November 15, 2018, there were 20 licensed cultivation facilities that failed to pay marijuana excise taxes as required under AS 43.61.010 totaling \$392,000. The list below does not include accounts that are currently on payment plans or have past due balances under \$100. If we reported the total number of past due accounts, we would report 32 taxpayers owing a total of \$728,400 – this is 25% of all marijuana taxpayers that owe past due taxes.

The high number of past due accounts is alarming and the Department of Revenue will continue to report the names of the delinquent taxpayers monthly to the Marijuana Control Board through AMCO, excluding the accounts that are currently on payment plans.

Taxpayer Name	MCB Licensee Name	License No.	
BRANDEN M. ROYBAL	ALASKA CANNABIS CULTIVATORS	10592	
ALASKA CANNABIS PROP	ALASKA CANNABIS PROPAGATION	11651 (Expired)	
DAVID J. STRAUB	ALASKA PRECISION	10040	
AZDREN POSHKA	ALASKA TASTY CANNABIS, LLC.	11488	
JACOB NYMAN	ALASKAN DEVILS LETTUCE	11556	
ARCTIC GREENERY, LLC	ARCTIC GREENERY, LLC	10286	
BRENNAN NORDEN	BOB'S MORNING BEAR CULTIVATION	10063	
DANISH GARDENS, LLC	DANISH GARDENS, LLC	10310	
DAVID PARKER	FAT TOPS, LLC	11138	
DARREN PHILLIPS	FIBERFLITE	13577	
GREEN LEAF, INC	GREEN LEAF	10066	
GREENSTAR INC	GREENSTAR, INC.	12872	
TIMELESS ADVENTURES, LLC	HERBAL INSTINCTS	10156	
PRESTIGE WORLDWIDE MANAGEMENT	KUSHTOPIA	11611	
MIKE D. KEISER	LAST FRONTIER JOINT OPERATIONS LLC	11957	
LAZY MOUNTAIN HARVEST, LLC	LAZY MOUNTAIN HARVEST LLC	10291 (Expired)	
JONATHAN MANSKER	MUSKY OX, LLC	10135	
SE MOOG DROOG LLC	SE MOOG DROOG LLC	10814	
CASEY J. WILKINS	STONED SALMON FARMS	11605	
KRYSTAL DIETRICH	TALKEETNA HERB COMPANY	10004	

Kelly Mazzei, Excise Tax Supervisor Department of Revenue – Tax Division

# **Notice of Violation**

(3AAC 306.805)

This form, all information provided and responses are public documents per Alaska Public Records ACT AS 40.25

Date: 2/12/19

Licensee: Timeless Adventures, LLC

**DBA: Herbal Instincts** 

License #/Type: #10156 Standard Cultivation Address: 405 Ream Lane, Fairbanks, AK 99712 AMCO Case #: AM1900267

This is a notice to you as licensee that an alleged violation has occurred. If the Marijuana Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

On 2/11/19 Herbal Instincts licensees self-reported an error made in METRC. Package tag ending in #2274 was incorrectly created from another package ending in #2255 resulting in package #2255 to reflect -175 grams and the harvest to reflect an overage of 175 grams in inventory not physically present. Package #2274 should have been derived from the Harvest Batch directly rather than package #2255. Package #2274 was transfered and accepted by The Green Room retail prior to the error being discovered by Herbal Instincts. This resulted in a need for a "virtual transfer" to be approved.

This is a violation of 3 AAC 306.435 Marijuana inventory tracking system (a) and 3 AAC 306.750 (b) Transportation

3 AAC 306.805 provides that upon receipt of a Notice of Violation, a licensee may request to appear before the board and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice of Violation. A licensee may respond, either orally or in writing to the Notice. 3 AAC 306.810 (2)(A)(B)(C) failed, within a reasonable time after receiving a notice of violation, to correct any defect that is the subject of the notice of violation of AS 17.8 or this chapter.

IT IS RECOMMENDED THAT YOU RESPOND IN WRITING TO DOCUMENT YOUR RESPONSE FOR THE MARIJUANA CONTROL BOARD.

\*Please send your response to the address below and include your marijuana license number in your response.

Alcohol & Marijuana Control Office ATTN: Enforcement 550 W. 7 <sup>th</sup> Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov	
Issuing Investigator: A. Stonecipher	Received by:
SIGNATURE: CS	SIGNATURE:
Delivered VIA: Email	Date:



### Package Creation Error

Stonecipher, Amanda M (CED) <amanda.stonecipher@alaska.gov> To: Herbal Instincts <herbalinstinctsak@gmail.com> Cc: "Davies, Jason M (CED)" <jason.davies@alaska.gov> Thu, Feb 21, 2019 at 8:15 AM

Hi Jessica,

After reviewing everything and speaking with my supervisor, I am going to officially retract your NOV – Case AM1900267 since METRC has outline a better solution than a virtual manifest and no virtual manifest ever occurred. You have the approval from AMCO to adjust your in-house package ending in #2255 back up to "0 quantity" as METRC support has offered as a solution. Please enter good notes and the METRC trouble ticket in when the adjustment is made so there is a quick reference for any other Investigator whom may see the adjustment on a report or in the system.

Of course, please keep this email and all documents related to the adjustment. Let me know if METRC needs more than this email as an approval from us allowing for the adjustment.

Have a wonderful weekend!



Amanda Stonecipher Special Investigator I Enforcement Unit Alcohol & Marijuana Control Office 1648 S. Cushman St., Ste 203 Fairbanks, AK 99701 Office (907) 451-2748 Cell (907) 987-6656 amanda.stonecipher@alaska.gov

From: Herbal Instincts [mailto:herbalinstinctsak@gmail.com]
Sent: Wednesday, February 20, 2019 12:58 PM
To: Stonecipher, Amanda M (CED) <amanda.stonecipher@alaska.gov>
Subject: Package Creation Error

Amanda,

In speaking with METRC, in regards to the package error, they said that I could adjust the package to zero and make a note regarding the administrative error with AMCO approval. Since there is nothing wrong with the package that is currently at The Green Room, they stated that it is not neccessary (although could be an option) to create a virtual manifest but they can't give me approval to adjust the package and advised emailing you. How would you like me to proceed with correcting this error?

Received by AMCO 9/5/19

September 4, 2019

To Whom it May Concern,

Regarding the Notice of Violation issued 11/16/2018, in September 2018 we fell delinquent on our Marijuana taxes due to crop failure. We worked with the Department of Revenue to create a payment plan for taxes that were due in September, October and November 2018. We began making payments in January 2019 toward this payment plan and have been on time with all other tax payments since that time. We are on track for completing our payment agreement by the end of the year. Please find the payment agreement and payment history attached.

Regarding the Notice of Violation issued 2/12/2019 please see the attached e-mail from Amanda Stonecipher officially retracting the NOV. An administrative error was made which initially was understood to require a virtual transfer. However, it was able to be corrected alternatively. The Notice of Violation was initially created prior to resolving the administrative error.

Thank you,

poster

Jessica Huff, Owner Timeless Adventures, LLC DBA Herbal Instincts





GOVERNOR MIKE DUNLEAVY

December 27, 2018

TIMELESS ADVENTURES, LLC **DBA: HERBAL INSTINCTS** 405 REAM LN FAIRBANKS AK 99712-3530

#### **Informal Payment Agreement**

EIN/SSN: Tax Type(s): Marijuana Tax

Dear TIMELESS ADVENTURES, LLC

As you requested, an informal payment agreement has been established for repayment of taxes, interest and penalties due for tax period(s) 9/30/2018, 10/31/2018, and 11/30/2018. A minimum payment of must be received in our office no later than January 30, 2019. Compounded interest is

currently accruing at 8% guarterly.

Installment Amount:

Account balance as of December 27, 2018

Tax Penalty Interest **Balance Due** 



Payment of this installment must be received by the Department of Revenue on or before January 30, 2019. Please send your payment with a copy of this letter or pay online by going to online-tax.alaska.gov. Please be advised that if timely payment is not received by the department, this agreement will be terminated and collection proceedings as stated below will commence.

Failure to make payments per this agreement will result in the department taking enforcement actions such as the filing of state tax liens, the levy of accounts and receivables, as well as the seizure of both real and personal property in amount sufficient to satisfy your liabilities to the Department of Revenue. If you are authorized to conduct business under a license issued by the State of Alaska, that license will be suspended per AS 43.10.045. until the account has been paid in full or other arrangements are agreed to by the state.

If you have any questions or concerns, please contact the Accounting and Collections Group at 907.465.2385 or dor.tax.collections@alaska.gov.

# **Department of Revenue**

TAX DIVISION

State Office Building 333 Willoughby Avenue, 11th Floor PO Box 110420 Juneau, Alaska 99811-0420 Main: 907.465.2320 Fax: 907.465.2375

www.tax.alaska.gov

Letter ID: L0575627264

### **REMITTANCE COPY**

Return this copy with installment payment

December 27, 2018

TIMELESS ADVENTURES, LLC DBA: HERBAL INSTINCTS 405 REAM LN FAIRBANKS AK 99712-3530 EIN/SSN: Tax Type: Marijuana Tax

**Informal Payment Agreement** 

Installment due date: January 30, 2019

Minimum Installment Amount:

Installment Amount remitted: \$\_\_\_\_\_

Mail installment payment to:

Department of Revenue TAX DIVISION Accounting and Collections PO Box 110420 Juneau, Alaska 99811-0420

Or make a payment online by going to: online-tax.alaska.gov

# Alcohol & Marijuana Control Office

License #10156 Initiating License Application 8/20/2019 8:54:47 AM

License Number:	10156
License Status:	Active-Operating
License Type:	Standard Marijuana Cultivation Facility
Doing Business As:	HERBAL INSTINCTS
Business License Number:	1044959
Designated Licensee:	Cristopher Konopka
Email Address:	herbalinstinctsak@gmail.com
Local Government:	Fairbanks North Star Borough
Community Council:	
Latitude, Longitude:	64.877466, -147.080840
Physical Address:	405 Ream Lane Fairbanks, AK 99712 UNITED STATES

#### Licensee #1

Type:EntityAlaska Entity Number:10030989Alaska Entity Name:Timeless Adventures, LLCPhone Number:907-202-4500Email Address:herbalinstinctsak@gmail.comMailing Address:405 Ream Lane<br/>Fairbanks, AK 99712<br/>UNITED STATES

#### Entity Official #1

Type: Individual

Name: Cristopher Konopka

SSN:

Date of Birth:

Phone Number: 907-202-4500

Email Address: Cristopher\_Konopka@yahoo.co m

Mailing Address: 405 Ream Lane Fairbanks, AK 99712 UNITED STATES

#### **Entity Official #3**

Type: Entity Alaska Entity Number: 10036773

Alaska Entity Name: Tanana Herb Company, LLC

Phone Number: 907-388-8023

Email Address: tananaherbcompany@gmail.com

Mailing Address: P.O. Box 81772 Fairbanks, AK 99708 UNITED STATES

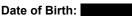
Note: No affiliates entered for this license.

#### Entity Official #2

Type: Individual

Name: Jessica Huff

SSN:



Phone Number: 907-202-2545

Email Address: Jessicahuff7@gmail.com

Mailing Address: 405 Ream Lane Fairbanks, AK 99712 UNITED STATES

#### Entity Official #4

Type: Individual

Name: Leslea Nunley

SSN:

Date of Birth:

Phone Number: 907-388-8023

Email Address: tananaherbcompany@gmail.com

Mailing Address: 2008 Perkins Drive Fairbanks, AK 99709 UNITED STATES



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

# 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 <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Alaska Marijuana Control Board

	Section 1 – Establishment In	formation	
Enter information for the li	censed establishment, as identified on the license applic	cation.	
Licensee:	Timeless Adventures, LLC	License Number:	10156
License Type:	Standard Marijuana Culti	vation Faci	lity
Doing Business As:	Herbal Instincts		
Premises Address:	405 Rign Ln		
City:	Fairbanks	State: AK	ZIP: 99712

#### Section 2 - Individual Information

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

Name:	Cristopher Konopta
Tieles	Owner

Section 3 – Violations & Charges	
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 <b>not</b> been convicted of any criminal charge in the previous two calendar years.	CP
I certify that I have <b>not</b> committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	æ
I certify that a notice of violation has <b>not</b> been issued for this license.	
Sign your initials to the following statement <u>only if you are unable to certify one or more of the above statements</u> :	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	æ



## **Section 4 - Certifications**

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

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.

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.

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 the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

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

Printed name of licensee



the State of Alaska

My commission expires: MOY 3D 2027

Subscribed and sworn to before me this  $5^{\text{th}}$  day of September , 20 19.





Initials



License #



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> 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 <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

Section 1	1 – Establi	shment	Informati	ion

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

Licensee:	Timeless Adventures, LLC	License Number:	10156
License Type:	Standard Marijuana Cultiva	tion Facility	
Doing Business As:	Herbal Instincts		
Premises Address:	405 Ream Ln		
City:	Frirbanks	State: AK	ZIP: 99712

### **Section 2 – Individual Information**

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

Name:	Jessica Huff
Title:	Owner

Section 3 – Violations & Charges	
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 <b>not</b> been convicted of any criminal charge in the previous two calendar years.	H
I certify that I have <b>not</b> committed any civil violation of AS 04, AS 17.38, or 3 AAC 306 in the previous two calendar years.	H
I certify that a notice of violation has <b>not</b> been issued for this license.	
Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	Initials
I have attached a written explanation for why I cannot certify one or more of the above statements, which includes the type of violation or offense, as required under 3 AAC 306.035(b).	H



### **Section 4 - Certifications**

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

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.

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.

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 the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

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.

ature of licensee

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: \_\_\_\_

ololoni



[Form MJ-20] (rev 4/24/2019)

Subscribed and sworn to before me this 30 day of AUgust 2019



Initials







F		12111121
	11	





Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u> Phone: 907.269.0350

# 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 <u>by each licensee</u> (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

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

Alaska Marijuana Control Board

Licensee:	Timeless Adventures, LLC License Number: 10156
License Type:	Standard Marijuana Cultivation Facility
Doing Business As:	Herbal Instincts
Premises Address:	405 Ream LD
City:	Fairbanks State: AK ZIP: 99712

### Section 2 - Individual Information

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

I certify that a notice of violation has not been issued for this license.

Name:	Lesler Nunter	
Title:	Member	

## Section 3 - Violations & Charges

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

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

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.

<u>llı</u>

Initials

Sign your initials to the following statement only if you are unable to certify one or more of the above statements:	
	/
have attached a written explanation for which express exits	

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



### Section 4 - Certifications

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

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.

I certify that I meet the residency requirement under AS 43.23 or I have submitted a residency exception affidavit (MJ-20a) along with this application.

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 the license is operated in accordance with the operating plan currently approved by the Marijuana Control Board.

I certify that I am operating in compliance with the Alaska Department of Labor and Workforce Development's laws and requirements pertaining to employees.

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.

day of

NISE

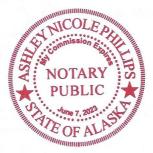
Signature of licensee

inted name of licensee

Subscribed and sworn to before me this

License #

My commission expires:



[Form MJ-20] (rev 4/24/2019)

Received by AMCO 9/5/19Page 2 of 2



