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:	Bristol Bay Bud Company, LLC	**License Number:**	17452		
License Type:	Standard Cultivation Facility				
Doing Business As:	Bristol Bay Bud Company				
Premises Address:	2439 S. Ridgecrest Rd.				
City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	HRGS Enterprises, LLC		
Title:	Sole Member of Bristol Bay Bud Company, LLC		
SSN:	10077025	**Date of Birth:**	

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STATE OF ALASKA

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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.

Heather Allen.
Signature of licensee

Notary Public in and for the State of Alaska

Heather Allen
Printed name of licensee

My commission expires: 11/23/2018

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

KAULEN PEVAN
NOTARY PUBLIC
MY COMMISSION EXPIRES NOVEMBER 23, 2018
STATE OF ALASKA

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License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Bristol Bay Bud Company				
Premises Address:	2439 S Ridgecrest				
City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Heather Allen		
Title:	Member of HRGS Enterprises, LLC and Manager of Bristol Bay Bud Company, LLC		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 2/1/19

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Heather Allen
Signature of licensee

Notary Public in and for the State of Alaska

Heather Allen
Printed name of licensee

My commission expires: 11/23/2019

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

KAULEN PEVAN
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License Type:	Standard Cultivation Facility				
Doing Business As:	Bristol Bay Bud Company				
Premises Address:	2439 S. Ridgecrest Rd.				
City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Gorden ~~Issacs~~ Isaacs		
Title:	HRGS Enterprises LLC Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

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Signature of licensee

Gorden ~~Issacs~~ Isaacs

Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 11/23/2019

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

KAULEN PEVAN
NOTARY PUBLIC
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Doing Business As:	Bristol Bay Bud Company				
Premises Address:	2439 S. Ridgecrest Rd.				
City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Susan ~~Issacs~~ Isaacs (SI)		
Title:	HRGS Enterprises LLC Member		
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.

Susan Isaacs
Signature of licensee

Notary Public in and for the State of Alaska

Susan ~~Issacs~~ Isaacs (SO) (SO)
Printed name of licensee

My commission expires: 11/23/2019

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

KAULEN PEVAN
NOTARY PUBLIC
MY COMMISSION EXPIRES NOVEMBER 23, 2019
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Doing Business As:	Bristol Bay Bud Company				
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City:	Wasilla	**State:**	AK	**ZIP:**	99623

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	RIchard Allen		
Title:	HRGS Enterprises LLC Member		
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

Notary Public in and for the State of Alaska

Richard Allen
Printed name of licensee

My commission expires: 11/23/2018

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

KAULEN PEVAN
NOTARY PUBLIC
MY COMMISSION EXPIRES NOVEMBER 23, 2019
STATE OF ALASKA

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