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

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

Licensee:	E & M Holdings, LLC	**License Number:**	16991		
License Type:	Marijuana Product Manufacturing Facility				
Doing Business As:	Stoney Moose Kitchens				
Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Kevin Johnson		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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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

Kevin Johnson

Printed name of licensee

Cindy Weisgram

Notary Public in and for the State of Alaska

My commission expires: 10.18.2022

Subscribed and sworn to before me this 27th day of January, 20 19.

STATE OF ALASKA
NOTARY PUBLIC
CINDY WEISGRAM
My Commission Expires 10.18.2022

Received by AMCO 1.28.19

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Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Melissa Brooks-Johnson		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Signature of licensee

Notary Public in and for the State of Alaska

Melissa Brooks-Johnson

Printed name of licensee

My commission expires: 10·18·2022

Subscribed and sworn to before me this 27th day of January, 2019.

STATE OF ALASKA
NOTARY PUBLIC
CINDY WEISGRAM
My Commission Expires 10.18.2022

Received by AMCO 1.28.19

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Doing Business As:	Stoney Moose Kitchens				
Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Madonna Hall		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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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.

Madonna Hall
Signature of licensee

Notary Public in and for the State of Alaska

Madonna Hall
Printed name of licensee

My commission expires: Nov 20, 2021

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

Official Seal
ANTHONY KARVELAS
Notary Public-State of Alaska
My Comm. Expires
November 20, 2021

Received by AMCO 1.28.19

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Doing Business As:	Stoney Moose Kitchens				
Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Scott Hall		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Scott R. Hall
Signature of licensee

Scott Hall
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: Nov 20, 2021

Subscribed and sworn to before me this 26th day of January, 20 19.

Official Seal
ANTHONY KARVELAS
Notary Public-State of Alaska
My Comm. Expires
November 20, 2021

Received by AMCO 1.28.19

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Doing Business As:	Stoney Moose Kitchens				
Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	John Dempsey		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Signature of licensee

Official Seal
KERIN N. CREWS
Notary Public-State of Alaska
My Comm. Expires
February 14, 2021

Notary Public in and for the State of Alaska

John Dempsey
Printed name of licensee

My commission expires: 2·14·21

Subscribed and sworn to before me this 25 day of January, 20 19.

Received by AMCO 1.28.19

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Doing Business As:	Stoney Moose Kitchens				
Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Mark Woodward		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Signature of licensee

Official Seal
KERIN N. CREWS
Notary Public-State of Alaska
My Comm. Expires
February 14, 2021

Notary Public in and for the State of Alaska

Mark Woodward

Printed name of licensee

My commission expires: 2·14·21

Subscribed and sworn to before me this 25 day of January, 2019.

Received by AMCO 1.28.19

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Premises Address:	9737 Mud Bay Rd., Suite 104				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Bo Meredith		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Signature of licensee

OFFICIAL SEAL
KIMBERLY A. VICCHY
NOTARY PUBLIC-STATE OF ALASKA
COMMISSION NO. 113401
MY COMMISSION EXPIRES WITH OFFICE

Notary Public in and for the State of Alaska

Bo Meredith

Printed name of licensee

My commission expires: with office

Subscribed and sworn to before me this 25th day of January, 2019.

Received by AMCO 1.28.19

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City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Allegra Machado		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 1.28.19

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Allegra Machado
Signature of licensee

Allegra Machado
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: with office

Subscribed and sworn to before me this 25th day of January, 2019.

OFFICIAL SEAL
KIMBERLY A. VICCHY
NOTARY PUBLIC-STATE OF ALASKA
COMMISSION NO. 113461
MY COMMISSION ENDS WITH OFFICE

Received by AMCO 1.28.19

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City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee or affiliate.

Name:	Eric Riemer		
Title:	Co-Owner		
SSN:	[redacted]	**Date of Birth:**	[redacted]

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Signature of licensee

Eric Riemer
Printed name of licensee

Melissa M. DeLeon
Notary Public in and for the State of Alaska

My commission expires: 12/25/19

Subscribed and sworn to before me this 22nd day of January, 2019.

State of Alaska
Notary Public
Melissa M. DeLeon
My Commission Expires 12-25-19

Received by AMCO 1.28.19