

# 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:

License #/Type:

Designated Licensee:

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](mailto:amco.enforcement@alaska.gov)

Issuing Investigator:

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA:

Date:



THE STATE  
of ALASKA  
GOVERNOR MIKE DUNLEAVY

Department of Revenue

TAX DIVISION

P.O Box 110420  
Juneau, Alaska 99811-0420  
Main: 907.465.2320  
Fax: 907.465.2375

December 18, 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 December 18, 2018, there were 9 licensed cultivation facilities that failed to pay marijuana excise taxes as required under AS 43.61.010 totaling \$205,000. 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 36 taxpayers owing a total of \$762,000 – this is 26% 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.

MCB Licensee Name	Taxpayer Name	License
ALASKA PRECISION	DAVID J. STRAUB	10040
ARCTIC GREENERY, LLC	ARCTIC GREENERY, LLC	10286
FARMER JACK'S LLC	FARMER JACKS LLC	10142
GREEN LEAF	GREEN LEAF, INC	10066
HAPPY CANNABIS	HAPPY CANNABIS	10201
HERBAL INSTINCTS	TIMELESS ADVENTURES, LLC	10156
LAST FRONTIER JOINT OPERATIONS LLC.	MIKE D. KEISER	11957
MUSKY OX, LLC	JONATHAN MANSKER	10135
SE MOOG DROOG LLC	SE MOOG DROOG LLC	10814

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

# Notice of Violation

Email

(3AAC 306.805)

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

Date: 2/27/19

License #/Type: 10201

Standard Cultivation

Designated Licensee: Kelsey Martinsen

AMCO Case#:

DBA: Happy Cannabis

Premises Address: 225 South Front Street, Wrangell, AK 99929

Mailing Address: PO Box 110, Wrangell, AK 99929

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.**

As of 02/27/2019, Happy Cannabis, 10201, Standard Cultivation, you were delinquent on your marijuana excise tax liability for the month of December 2018.

You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation will be brought to the Marijuana Control Board.

Your attention is directed to: AS 17.38.010(b)(2) legitimate, taxpaying business people, and not criminal actors, will conduct sales of marijuana; 3 AAC 306.480. Marijuana tax to be paid; 3 AAC 306.810. Suspension or revocation of license; AS 43.61.030(b). Marijuana cultivation facility fails to pay tax; AS 43.05.230(e) DOR can publish list of taxpayer(s) who failed to pay their taxes.; 15 AAC 61.020. License revocation and suspension.

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**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](mailto:amco.enforcement@alaska.gov)

Issuing Investigator: J. Hoelscher

Received by:

SIGNATURE:



SIGNATURE:

Delivered VIA: Email

Date:

Kelsey J. Martinsen

PO Box 110

Wrangell, AK 99929

(907) 305-0292

[kjm420@hotmail.com](mailto:kjm420@hotmail.com)

To Whom it May Concern,

On 2/27/29 we were given Notice of Violation for delinquent excise taxes for December 2018. We have rectified this and are current on our taxes.

Sincerely,



6/15/19

Kelsey J. Martinsen

Owner and Operator

Happy Cannabis

Received by AMCO 6.26.19



# Alcohol & Marijuana Control Office

Initiating License Application

6/14/2019 10:42:34 AM

**License Number:** 10201**License Status:** Active-Operating**License Type:** Standard Marijuana Cultivation Facility**Doing Business As:** HAPPY CANNABIS**Business License Number:** 1033845**Designated Licensee:** Kelsey Martinsen**Email Address:** kjm420@hotmail.com**Local Government:** Wrangell (City and Borough of)**Community Council:****Latitude, Longitude:** 56.471000, -132.383000**Physical Address:** 225 South Front Street  
Wrangell, AK 99929  
UNITED STATES**Licensee #1****Type:** Individual**Name:** KELSEY J MARTINSEN**SSN:** [REDACTED]**Date of Birth:** [REDACTED]**Phone Number:** 907-305-0292**Email Address:** kjm420@hotmail.com**Mailing Address:** po box 110  
Wrangell, AK 99929  
UNITED STATES**Licensee #2****Type:** Individual**Name:** SARINEE NUAMNUI**SSN:** [REDACTED]**Date of Birth:** [REDACTED]**Phone Number:** 907-305-0292**Email Address:** kjm420@hotmail.com**Mailing Address:** po box 110  
Wrangell, AK 99929  
UNITED STATES**Entity Official #1****Type:** Individual**Name:** Sarinee Nuamnui**SSN:** [REDACTED]**Date of Birth:** [REDACTED]**Phone Number:** 907-305-0292**Email Address:** kjm420@hotmail.com**Mailing Address:** po box 110  
Wrangell, AK 99929  
UNITED STATES**Entity Official #2****Type:** Individual**Name:** Kelsey Martinsen**SSN:** [REDACTED]**Date of Birth:** [REDACTED]**Phone Number:** 907-305-0292**Email Address:** kjm420@hotmail.com**Mailing Address:** po box 110  
Wrangell, AK 99929  
UNITED STATES**Note:** No affiliates entered for this license.



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

### Section 1 – Establishment Information

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

Licensee:	Kelsey Jene Martinsen, Sarinee Nuamnui	License Number:	10201		
License Type:	Standard Marijuana Cultivation				
Doing Business As:	Happy Cannabis				
Premises Address:	225 South Front Street				
City:	Wrangell	State:	Alaska	ZIP:	99929

### Section 2 – Individual Information

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

Name:	Kelsey Jene Martinsen
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 **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.

I certify that a notice of violation has **not** 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).



# Form MJ-20: Renewal Application Certifications

## Section 4 – Certifications

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

Initials

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.



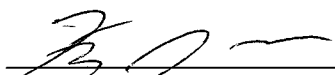
I certify that I have not violated any restrictions pertaining to this particular license type, and that this license has not been operated in violation of a condition or restriction imposed by the Marijuana Control Board.



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.

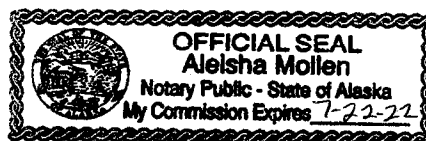
  
Signature of licensee

Kelgey J. Martensen  
Printed name of licensee

  
Notary Public in and for the State of Alaska

My commission expires: 7-22-22

Subscribed and sworn to before me this 18<sup>th</sup> day of June, 2019.





Alaska Marijuana Control Board

## Form MJ-20: Renewal Application Certifications

### What is this form?

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This form must be completed and submitted to AMCO's main office by each licensee (as defined in 3 AAC 306.020(b)(2)) before any license renewal application will be considered complete.

### Section 1 – Establishment Information

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

Licensee:	Kelsey Jene Martinsen, Sarinee Nuamnui	License Number:	10201		
License Type:	Standard Marijuana Cultivation				
Doing Business As:	Happy Cannabis				
Premises Address:	225 South Front Street				
City:	Wrangell	State:	Alaska	ZIP:	99929

### Section 2 – Individual Information

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

Name:	Sarinee Nuamnui
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 **not** been convicted of any criminal charge in the previous two calendar years.

SN
----

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.

SN
----

I certify that a notice of violation has **not** 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).

SN
----



**Form MJ-20: Renewal Application Certifications****Section 4 – Certifications**

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

Initials

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.

SN

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.

SN

I certify that this establishment complies with any applicable health, fire, safety, or tax statute, ordinance, regulation, or other law in the state.

SN

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

SN

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

SN

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.

SN

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.

SN

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.

Sarince Nuamnei  
Signature of licensee

Aleisha Mollen  
Notary Public in and for the State of Alaska

Sarince Nuamnei  
Printed name of licensee

My commission expires: 7-22-22

Subscribed and sworn to before me this 18<sup>th</sup> day of June, 2019.

