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:

Licensee:

DBA:

License #/Type: Address: AMCO Case #:

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 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 th Ave, Suite 1600 Anchorage, Alaska 99501 amco.enforcement@alaska.gov	
Issuing Investigator:	Received by:
SIGNATURE: JZ	SIGNATURE:
/ Delivered VIA:	Date:

From:	Jason Kolanko
To:	<u>Johnson, Steven M (CED)</u>
Cc:	Hoelscher, James C (CED); Davies, Jason M (CED)
Subject:	Re: Please see attached Notice
Date:	Thursday, January 31, 2019 2:21:25 PM
Attachments:	image001.png

Hello all,

I apologize for this oversight. When we received the transfer the shipment was mistakenly verified against the bill of sale instead of the manifest, and we failed to notice the package was not listed on the manifest.

I will be convening with my team to introduce a dual control when accepting transfers in the future in order to ensure this does not happen again.

I am personally embarrassed by this incident, and I do sincerely apologize.

Thank you for your time,

Jason

On Thu, Jan 31, 2019, 1:52 PM Johnson, Steven M (CED) <<u>steven.johnson@alaska.gov</u> wrote:

Please read the red highlighted portion.

Respectfully,

?

Steven M. Johnson Special Investigator

Enforcement Unit Alcohol & Marijuana Control Office State Office Building, 9th Floor

333 Willoughby Avenue

Juneau, AK 99801 Office (907) 465-2330

Cell (907) 500-2053 <u>steven.johnson@alaska.gov</u>

Explanation of Violation #AM190207

In January of this year we received a violation for accepting a transfer that was missing a package on the manifest. When we received the transfer we mistakenly verified quantities based on the bill of sale instead of the manifest, and accepted the transfer when verification was complete. When we noticed the missing package we reported the discrepancy as soon as possible. At the direction of enforcement we then used a virtual transfer for the omitted package. In response to this we now require two people to verify packages before accepting a manifest.

Thank you for your time,

Jason Kolanko Rainforest Cannabis #10883 726 Water St. Ketchikan, AK 99901

Alcohol & Marijuana Control Office

License Number: 10883 License Status: Active-Operating License Type: Retail Marijuana Store Doing Business As: RAINFOREST CANNABIS Business License Number: 1040416 Designated Licensee: JASON C KOLANKO Email Address: jckolanko@gmail.com Local Government: Ketchikan (City of) Community Council: Latitude, Longitude: 55.347350, -131.660160 Physical Address: 726 Water Street Ketchikan, AK 99901 UNITED STATES

Licensee #1

Type: Individual

Name: GARY CROY



Phone Number: 907-821-3200

Email Address: gary.croy@gmail.com

Mailing Address: PO Box 7164 Ketchikan, AK 99901 UNITED STATES

Licensee #3

Type: Individual

Name: JASON C KOLANKO



Phone Number: 907-821-1769

Email Address: jckolanko@gmail.com

Mailing Address: 33 Powerhouse Rd Ketchikan, AK 99901 UNITED STATES License #10883 Initiating License Application 5/28/2019 3:27:27 PM

Licensee #2

Type: Individual Name: LORRAINE C KOLANKO

Phone Number: 907-821-8811

Email Address: lckolanko@gmail.com

Mailing Address: PO Box 7164 Ketchikan, AK 99901 UNITED STATES

Note: No entity officials entered for this license.

Note: No affiliates entered for this license.



Alcohol and Marijuana Control Office 550 W 7th 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 – Establishment Information

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

Licensee:	Jason Kolanko, Gary Croy, Lorraine Kolanko License Number:			3a-10883		
License Type:	Marijuana Retail Store				-14	
Doing Business As:	Rainforest Cannabis					
Premises Address:	726 Water Street					
City:	Ketchikan	State:	AK	ZIP:	99901	

Section 2 – Individual Information

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

Name:	Gary Croy
Title:	Partner

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.	And
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.	the
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).	Shr



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 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 licens

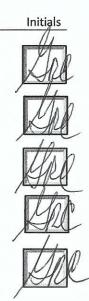
Printed name of licensee

NOTARY PUBLIC KELLI A. KUHARICH STATE OF ALASKA My Commission Expires December 25, 2020

Kelli & Kuhonch Notary Public in and for the State of Alaska

My commission expires: 1212512020

Subscribed and sworn to before me this Delug







Alcohol and Marijuana Control Office 550 W 7th 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

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Licensee:	Jason Kolanko, Gary Croy, Lorraine Kolanko	1	Number:	3a-10	0883	
License Type:	Marijuana Retail Store					
Doing Business As:	Rainforest Cannabis					
Premises Address:	726 Water Street				Tatul destruction of the second	
City:	Ketchikan	State:	AK	ZIP:	99901	

Section 2 – Individual Information

Enter information for the individual licensee who is completing this form.	
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Name:	Jason Kolanko	
Title:	Partner	

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.	276
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.	J7L
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).	J.K.

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



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 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.

Juron Blanks Signature of licensee

ason Kolantis

Printed name of licensee



ll & Kuhr

My commission expires: 12/25 2020

Subscribed and sworn to before me this 18 day of Sully _____, 20 [9].





Initials

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Alcohol and Marijuana Control Office 550 W 7th 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

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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 I	nformati	ion		
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Licensee:	Jason Kolanko, Gary Croy, Lorraine Kolanko	License	Number:	3a-10	0883
License Type:	Marijuana Retail Store			1	
Doing Business As:	Rainforest Cannabis				and an
Premises Address:	726 Water Street	······································			
City:	Ketchikan	State:	AK	ZIP:	99901

Section 2 - Individual Information

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

Name:	Lorraine Kolanko	
Title:	Partner	

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.	al
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.	THE AND
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).	SX

Page 1 of 2

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



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.

C 4		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	e
Borramo	Kolanto	NOTARY PUBLIC	Kelli A Kubanch
Signature of licensee)	KELLIA. KUHARICH	otary Public in and for the State of Alaska
		STATE OF ALASKA My Commission Expires December 25, 2020	
Lorraine	Kolanto		ly commission expires: 12 25 2020
Printed name of license	ee)		

Subscribed and sworn to before me this 18 day of July 20 9

Initials





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License # 3a-10883