## **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:

Delivered VIA:

grade

Received by: SIGNATURE:

Date:





## Department of Revenue

#### TAX DIVISION

State Office Building PO Box 110420 Juneau, Alaska 99811-0420 Main: 907.465.2320 Fax: 907.465.2375

www.tax.alaska.gov

Letter ID: L0384360448

April 04, 2019

HEMPCO LLC DBA: ALASKA CANNABIS COMPANY **PO BOX 595** KENALAK 99611-0595

#### Informal Payment Agreement

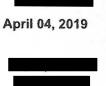
EIN/SSN: XX-XXX4880 Tax Type(s): Marijuana Tax

Dear HEMPCO LLC

As you requested, an informal payment agreement has been established for repayment of taxes, interest and penalties due for tax period(s) 1/31/2019 and 2/28/2019. A minimum payment of must be received in our office no later than April 15, 2019. Compounded interest is currently accruing at quarterly.

Installment Amount:

Account balance as of



Tax Penalty Interest **Balance** Due



Payment of this installment must be received by the Department of Revenue on or before April 15, 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.

> AMCO APR - 4 2019

## **REMITTANCE COPY**

Return this copy with installment payment

April 04, 2019

HEMPCO LLC DBA: ALASKA CANNABIS COMPANY PO BOX 595 KENAI AK 99611-0595

EIN/SSN: XX-XXX4880 Tax Type: Marijuana Tax

#### Informal Payment Agreement

Installment due date: April 15, 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

## AMCO APR - 4 2019

#### MJ-20, Sec. 3, Box 4:

Alaska Seeds & Stems, LLC

d/b/a Alaska Cannabis Company

License Number: 12816

We received Notice of Violation on 4/2/2019, for failure to timely pay marijuana excise taxes. We have contacted the State of Alaska, Department of Revenue and the matter has been resolved. We simply fell behind. This will NOT happen again.

This is why we could not certify that a Notice of Violation had not been issued for this license for the NOV receive in the last license year cycle on 4/2/2019.

Thank you.

## Alcohol & Marijuana Control Office

License #12618 Initiating License Application 6/24/2019 3:21:27 PM

License Number:	12618
License Status:	Active-Operating
License Type:	Standard Marijuana Cultivation Facility
Doing Business As:	ALASKA CANNABIS COMPANY
Business License Number:	1044579
Designated Licensee:	Jenny Foster
Email Address:	Jenny@AlaskaCannabis.com
Local Government:	Kenai Peninsula Borough
Community Council:	
Latitude, Longitude:	60.607251, -151.333706
Physical Address:	43280 Kenai Spur Highway Nikiski, AK 99635 UNITED STATES

#### Licensee #1

Type: Entity Alaska Entity Number: 10040880 Alaska Entity Name: Hempco LLC

Phone Number: 907-830-8666

Email Address: Jenny@AlaskaCannabis.com

Mailing Address: PO Box 595 Kenai, AK 99611 UNITED STATES

#### Entity Official #2

Type: Individual

Name: Jason Swircenski



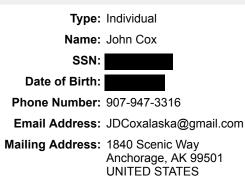
Date of Birth:

Phone Number: 907-229-0616

Email Address: Jason@AlaskaCannabis.com

Mailing Address: 53040 Rambling Road Nikiski, AK 99635 UNITED STATES

#### Entity Official #4



#### Entity Official #1

Type: Individual

Name: Dwain Foster



Date of Birth:

Phone Number: 907-227-3619

Email Address: Captcod3091@aol.com

Mailing Address: PO Box 162 Sand Point, AK 99661 UNITED STATES

#### Entity Official #3

Type: Individual

Name: Jenny Foster



Date of Birth:

Phone Number: 907-830-8666

Email Address: Jenny@AlaskaCannabis.com

Mailing Address: PO Box 595 Kenai, AK 99611 UNITED STATES

#### **Entity Official #5**

Type: Individual

Name: Robb Rood



Date of Birth:

Phone Number: 907-202-1872

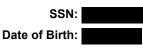
Email Address: robbrood@gmail.com

Mailing Address: 2350 Cleo Avenue Anchorage, AK 99516 UNITED STATES

### Entity Official #6

Type: Individual

Name: Dave Lucey



Phone Number: 907-632-6799

Email Address: akthinice@hotmail.com

Mailing Address: 5311 E 26th Avenue, #2 Anchorage, AK 99508 UNITED STATES Note: No affiliates entered for this license.



## 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.

Alaska Marijuana Control Board

Licensee:	HZNAPZO, LLC	License Number:	12618
License Type:	STANDARD EWLTINATION TA	LLITY	
<b>Doing Business As:</b>	ALASKA CANNABIS COM		
Premises Address:	43280 RENA1 SPU	IR HWY. Un	its A.B.C.D
City:	NIKISKL	State: AK	ZIP: 99635

#### Section 2 - Individual Information

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

Name:	JOHN D COX	
Title:	MEMBER LLC	

#### **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.	TOLS
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.	AND A
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).	EAG.
[Form MJ-20] (rev 4/24/2019)	Page 1 of 2



#### 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  $\zeta$  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

TOHN 1

Printed name of licensee



Not ry Public in and for the State

Not ry Public in and for the State of Alaska

My commission expires:  $\partial \cdot \partial 4 \cdot \partial 3$ 

Subscribed and sworn to before me this 10 day of Jone

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

License # ZG 8

Page 2 of 2



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u> htt<u>ps://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 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:	l'Empco LLC	License Number: 12(c)8
License Type:	Stradend MAPTONDU	Cultiurtion / licence
Doing Business As:	MASCA CANNER	Sts Comprime
Premises Address:	43280 NEUMS	PUR Histricky A.B.C.D
City:	NIUSKI	State: MC ZIP: 79625

#### Section 2 - Individual Information

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

Name:	JASON M. SWINCENSUT
Title:	MEMBER, LLC

#### Section 3 - Violations & Charges

Read each line helow	and then sign your initials in	the how to the ri	ght of any applicable statements:	Initials
Read each line pelow.	, and then sign your mulais in		ght of any applicable statements.	11111013

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 certity one or more of the above statements:

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 MI-20] (rev 4/24/2019)

Page 1 of 2

### 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

STATE OF ALASKA NOTARY PUBLIC LEA STUBER

Jin Shih

Notary Public in and for the State of Alaska

My commission expires: 3 - 18-23

Initials

Subscribed and sworn to before me this 11 day of Junc ,20 19.

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

License # 12-6/8

Page 2 of 2



## 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:	Heupco, LLC	License Number: 126(8
License Type:	Spridered MM Think	M GULTICATION TACILI
Doing Business As:	APASKA CANALATS	IS Company
Premises Address:	43280 Kenti SA	IR His win, UNISABCD
City:	1 Didski	State: ZIP: A9635

## Section 2 - Individual Information

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

Name:	Jenny L. Foster	
Title:	managing member	

## 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.	JLF
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.	JLF
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).	JLF

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



#### Certifications Section 4

Read each line below, a	and then sign y	our initials in the box to the right of each statement:
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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.

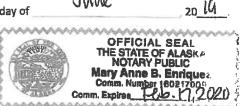
ature of le see

Printed name flicensee

Notary Public in and for the State of Alaska

My commission expires: FCb. 17, 2020

Subscribed and sworn to before me this day of June



Page 2 of 2





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## 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  $\underline{by}$  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:	HEMPEON LLC.	License Number:	268
License Type:	SIMMARC MARITUMA	Culturtio	WERUIN
Doing Business As:	MASCIO CIMUNADIS	Coupmi	· · · ·
Premises Address:	432 BO KEUM SDU	R Highurl	, Unite A, B,C,D
City:	NICISU	State: A	ZIP: 99635

#### Section 2 - Individual Information

Enter information for	the individual licensee who is completing this form.
Name:	Robert V. Rood
Title:	memberlic

### Section 3 - Violations & Charges

Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
certify that I have not been convicted of any criminal charge in the previous two calendar years.	200
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.	an
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).	Aur

[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:			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. Lagree 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

ZOBB

Printed name of licensee

CORLOVEZ No ary Public in and for the State of Alaska

My commission expires: April 17 2020 Subscribed and sworn to before me this \_\_\_\_\_ day of "HUHADAANAAHHII"" Minimum Co. [Form MJ-20] (rev 4/24/2019) License # 26 Page 2 of 2

Received by AMCO 8/1/19

06/09/2019 7:48PN FAX 9072830821

20003/0004



🕺 Alaska Marijuana Control Board

Alcohol and Marijuans Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>mariluana\_licensing@alaska.gov</u> <u>https://www.commerce\_ataska.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 manipuana establishment license renewal applications. Each person signing an application for a manipuana 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 manipuana 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:	LLC LLC	License Number: 12618	
License Type:	Smand MARTY	LAWA CU MUAHON TRelli	ty
Doing Business As:	MARICA GAMAT	STS COUPANY	
Premises Address:	143280 KenAi	SPUR HELLING MAS	- 7
City:	Nilusici	State: ZIP: 6	*

#### Section 2 - Individual Information

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

Name:	Diagin A- Foster SR	
Title:	MEMBER LIC	
	N. J. h. harden and her	

### 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.

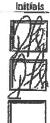
I certify that I have not committed any civil violation of AS 04, A5 17.38, or 3 AAC 306 in the previous two calendar years.

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:

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] (rev 4/24/2019)





Initials



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### Alaska Marijuana Control Board 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:

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i certify that no person other than a licensee listed on my marijuane 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.

Difath &

Signa ure of licensee

101212 Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires; 8/22/19



Subscribed and sworn to before me this  $\int \mathcal{D}^{\mathcal{M}} day of \mathcal{D}$  (and

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

License # 1268

Page 2 of 2







# 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:	HEIMPCO, LLC	License Number:	12618
License Type:	stracted WAR James	a HUATON	) L'Cente
Doing Business As:	MASCA CAUNATIFS	Compt	W
Premises Address:	43280 KEUA SPUR	Hishury, C	INTS ABIC, D-
City:	Nicista	State: MC	ZIP: 99635

#### Section 2 - Individual Information

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

Name:	DAVE LUCEY
Title:	Member LLC

#### 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.	DI
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.	074
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).	DZL

[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.

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.

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.

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.

Barbard and a first and a first Notary Public APRIL NEBREJA State of Alaska Notary Public In and for the State of Alaska Signature of licentee My Commission Expires Merch 10, 2021

VE UCE

Printed name of licensee

My commission expires: MADLH

Subscribed and sworn to before me this 1 day of 140E