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)) 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 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:	Timeless Adventures, LLC	**License Number:**	10156		
License Type:	Standard Marijuana Cultivation				
Doing Business As:	Herbal Instincts				
Premises Address:	405 Ream Lane				
City:	Fairbanks	**State:**	AK	**ZIP:**	99712

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Cristopher Konopka
Title:	Owner/GM

[redacted]

Received by AMCO 12.18.20 (dropped off)

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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.

Signature of licensee

Cristopher Konopka
Printed name of licensee

"Official Seal"
Notary Public
Adyson Wright
State of Alaska
Commission # 200916021 Expires: 09/16/24

Notary Public in and for the State of Alaska

My commission expires: 9/16/24

Subscribed and sworn to before me this 20 day of November, 2020.

Received by AMCO 12.18.20 (dropped off)

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Premises Address:	405 Ream Lane				
City:	Fairbanks	**State:**	AK	**ZIP:**	99712

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Samuel Hachey
Title:	Member
[redacted]	

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Signature of licensee

Samuel Hachey

Printed name of licensee

JAMES M. BALOG
NOTARY PUBLIC
STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: May 1, 2023

Subscribed and sworn to before me this 7th day of December, 2020.

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City:	Fairbanks	**State:**	AK	**ZIP:**	99712

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Leslea Nunley
Title:	Member
[redacted]	

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Signature of licensee

Leslea Nunley

Printed name of licensee

JAMES M. BALOG NOTARY PUBLIC STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: May 1, 2023

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Premises Address:	405 Ream Lane				
City:	Fairbanks	**State:**	AK	**ZIP:**	99712

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Joseph Hachey
Title:	Member

[redacted]

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Signature of licensee

Joseph Hachey

Printed name of licensee

JAMES M. BALOG NOTARY PUBLIC STATE OF ALASKA

Notary Public in and for the State of Alaska

My commission expires: May 1, 2023

Subscribed and sworn to before me this 7th day of December, 2020.

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