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:	E&M Holdings, LLC	**License Number:**	10657		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Stoney Moose Farms				
Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Eric Riemer		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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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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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

Notary Public in and for the State of Alaska

Eric Riemer

Printed name of licensee

My commission expires: 9/25/2024

Subscribed and sworn to before me this 13th day of November, 2020.

MAGGIE G. MOSS
Notary Public
State of Alaska
My Commission Expires Sep 25, 2024

Received by AMCO 12.2.20

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Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Kolbe Pollock		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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Signature of licensee

Kolbe Pollock
Printed name of licensee

Emily Dell
Notary Public in and for the State of Alaska

My commission expires: 5/31/2023

Subscribed and sworn to before me this 16 day of November, 2020.

EMILY M. DELL
Notary Public
State of Alaska
My Commission Expires May 31, 2023

Received by AMCO 12.2.20

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Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	John Knechtel		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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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

John Knechtel
Printed name of licensee

Emily Dell
Notary Public in and for the State of Alaska

My commission expires: 5/31/2023

Subscribed and sworn to before me this 16 day of November, 2020.

EMILY M. DELL
Notary Public
State of Alaska
My Commission Expires May 31, 2023

Received by AMCO 12.2.20

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License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Stoney Moose Farms				
Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Michele Vitcovitch		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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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

Notary Public
TAUSHIA HILTON
State of Alaska
My Commission Expires Jan. 1, 2022

Notary Public in and for the State of Alaska

Michele Vitcovitch
Printed name of licensee

My commission expires: Jan 1, 2022

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

Received by AMCO 12.2.20

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Doing Business As:	Stoney Moose Farms				
Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Shane Jasper		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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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

Shane Jasper

Printed name of licensee

Jennifer C. Brynaert
Notary Public in and for the State of Alaska

My commission expires: 10.23.2021

Subscribed and sworn to before me this 19 day of november, 2020.

Notary Public
JENNIFER C. BRYNAERT
State of Alaska
My Commission Expires Oct. 23, 2021

Received by AMCO 12.2.20

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Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Allegra Machado		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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550 W 7th Avenue, Suite 1600
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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: 9/25/2024

Subscribed and sworn to before me this 23rd day of November, 20 20.

MAGGIE G. MOSS
Notary Public
State of Alaska
My Commission Expires Sep 25, 2024

Received by AMCO 12.2.20

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Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Bo Meredith		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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Signature of licensee

Notary Public in and for the State of Alaska

Bo Meredith
Printed name of licensee

My commission expires: 9/25/2024

Subscribed and sworn to before me this 23rd day of November, 20 20.

MAGGIE G. MOSS
Notary Public
State of Alaska
My Commission Expires Sep 25, 2024

Received by AMCO 12.2.20

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Premises Address:	3000 West Tongass Narrows				
City:	Ketchikan	**State:**	AK	**ZIP:**	99901

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Madonna Hall		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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Madonna R. Hall
Signature of licensee

Notary Public in and for the State of Alaska

Madonna Hall
Printed name of licensee

My commission expires: 9/25/2024

Subscribed and sworn to before me this 16th day of November, 2020.

MAGGIE G. MOSS
Notary Public
State of Alaska
My Commission Expires Sep 25, 2024

Received by AMCO 12.2.20

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Section 2 – Individual Information

Enter information for the individual licensee.

Name:	Scott Hall		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

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Signature of licensee

Scott Hall
Printed name of licensee

Notary Public in and for the State of Alaska

My commission expires: 9/25/2024

Subscribed and sworn to before me this 16th day of November, 2020.

MAGGIE G. MOSS
Notary Public
State of Alaska
My Commission Expires Sep 25, 2024

Received by AMCO 12.2.20

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

Section 2 – Individual Information

Enter information for the individual licensee.

Name:	John Dempsey		
Title:	Member		
SSN:	[redacted]	**Date of Birth:**	[redacted]

Received by AMCO 12.2.20

Alcohol and Marijuana Control Offic
550 W 7th Avenue, Suite 160
Anchorage, AK 9950
marijuana.licensing@alaska.go
https://www.commerce.alaska.gov/web/amc
Phone: 907.269.035

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Signature of licensee

Notary Public in and for the State ~~of Alaska~~ Colo

John Dempsey

Printed name of licensee

My commission expires: 04/25/2022

Subscribed and sworn to before me this 17th day of November, 2020.

JESSIE LEIGH
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20184017877
MY COMMISSION EXPIRES 04/25/2022

Received by AMCO 12.2.20