AMCO received 10/22/2021

From: John Wright
To: Marijuana Licensing (CED sponsored)
Cc: Brenda Butler
Subject: Alaskan Pharms #13785
Date: Friday, October 22, 2021 3:43:44 PM
Attachments: Dept of Revenue payoff notices Alaskan Pharms.PDF
Up dated AMCO MJ-20 John.PDF
Up dates Amco MJ-20 REGINA.PDF
AMCO $200.00 refund 10 2021.PDF
Tax MOs for Sept 2021 and October monthly payment.PDF

Hello Mr. Hall.
I have attached the notices from Alaska Dept. of Revenue, showing no amounts due for the dates stated on the NOV's. All have been paid.
I am presently in a payment program with the Dept. of Revenue and all payments have been and are current.
I understand the importance of keeping current with our tax obligations and have caught up and will no longer have to play catch up, but will be able to stay in a positive status with the tax office and AMCO.
Thank you, for working with us thru these times.
Attached are:
1. Notice from Dept of Revenue, payed in full for NOV dates.
2. Receipts showing taxes paid for September 2021 and monthly install payment.
3. Up dated MJ-20's. for Regina and john, myself.
4. Signature sheet for 200 dollar refund.
Thank you
John Wright

AMCO received 10/22/2021

THE STATE of ALASKA

GOVERNOR MIKE DUNLEAVY

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

August 04, 2021

Letter ID: L0128069632

ALASKAN PHARMS LLC
DBA: ALASKAN PHARMS LLC.
PO BOX 88 NKI
NAUKATI BAY AK 99950

NOTICE

FEIN:	XX-XXX6026
Tax Type:	Marijuana Tax
License #:	13785
Tax Account #:	MRT-10089199-004
Tax Period End:	March 31, 2020

You are receiving this notice as a result of changes made to your account. There is no amount due and therefore no action needed unless you want to appeal the changes. The following may represent tax, penalties, and/or interest due after a review or an assessment. Interest and penalties are calculated through the date of this letter.

Tax	$4,849.00
Interest	65.61
Delinquency penalties	701.50
Less: payments applied	-5,616.11
Amount Due	**$0.00**

You can access your account, view the current balance, and schedule and confirm payments online by visiting: online-tax.alaska.gov. If the amount due is greater than or equal to $100,000.00, payment must be made either online or by wire transfer. If paying by wire transfer, you must notify the State of Alaska, Treasury Division by electronic mail at: dor.trs.cashmgmt@alaska.gov regarding the particulars of the transfer by 2:00 PM Alaska Time **the business day before** the wire transfer is initiated. The notice must include the payor name, payment amount, settlement date, tax type, and the purpose of the payment. If a payment was submitted previously, please advise us of the date and payment method. If payment is made by check, include the attached voucher with the payment to the address indicated on the voucher. Confirmation of payment is available by accessing your account at: online-tax.alaska.gov.

Interest is computed per Alaska Statute and can be found on the Alaska Legislature website: http://www.akleg.gov/basis/statutes.asp#43.05.225. Quarterly interest rates can be found on the Tax Division website: http://tax.alaska.gov/programs/interest.aspx. Interest will continue to accrue on the amounts shown above until paid in full. Failure-to-file and failure-to-pay penalties may continue to accrue at 5% per 30 day period up to a maximum of 25%.

If you disagree with the assessment, you must give notice and request an informal conference with the Department within 60 days after the mailing date of this letter. Use the appeal form available at: online-tax.alaska.gov and submit the completed form either online or mail it to the address above, Attention: Appeals. On the form you should state the Department action to which you object, the relief sought, the grounds for the objection, a brief summary of the facts at issue, and the legal authority that

AMCO received 10/22/2021

THE STATE of ALASKA
GOVERNOR MIKE DUNLEAVY

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

August 04, 2021

Letter ID: L1201811456

ALASKAN PHARMS LLC
DBA: ALASKAN PHARMS LLC.
PO BOX 88 NKI
NAUKATI BAY AK 99950

NOTICE

FEIN:	XX-XXX6026
Tax Type:	Marijuana Tax
License #:	13785
Tax Account #:	MRT-10089199-004
Tax Period End:	April 30, 2020

You are receiving this notice as a result of changes made to your account. There is no amount due and therefore no action needed unless you want to appeal the changes. The following may represent tax, penalties, and/or interest due after a review or an assessment. Interest and penalties are calculated through the date of this letter.

Tax	$2,051.85
Interest	64.74
Delinquency penalties	512.95
Less: payments applied	-2,628.26
Other credits and adjustments	-1.28
Amount Due	**$0.00**

You can access your account, view the current balance, and schedule and confirm payments online by visiting: online-tax.alaska.gov. If the amount due is greater than or equal to $100,000.00, payment must be made either online or by wire transfer. If paying by wire transfer, you must notify the State of Alaska, Treasury Division by electronic mail at: dor.trs.cashmgmt@alaska.gov regarding the particulars of the transfer by 2:00 PM Alaska Time **the business day before** the wire transfer is initiated. The notice must include the payor name, payment amount, settlement date, tax type, and the purpose of the payment. If a payment was submitted previously, please advise us of the date and payment method. If payment is made by check, include the attached voucher with the payment to the address indicated on the voucher. Confirmation of payment is available by accessing your account at: online-tax.alaska.gov.

Interest is computed per Alaska Statute and can be found on the Alaska Legislature website: http://www.akleg.gov/basis/statutes.asp#43.05.225. Quarterly interest rates can be found on the Tax Division website: http://tax.alaska.gov/programs/interest.aspx. Interest will continue to accrue on the amounts shown above until paid in full. Failure-to-file and failure-to-pay penalties may continue to accrue at 5% per 30 day period up to a maximum of 25%.

If you disagree with the assessment, you must give notice and request an informal conference with the Department within 60 days after the mailing date of this letter. Use the appeal form available at: online-tax.alaska.gov and submit the completed form either online or mail it to the address above, Attention: Appeals. On the form you should state the Department action to which you object, the relief

AMCO received 10/22/2021

THE STATE of ALASKA

GOVERNOR MIKE DUNLEAVY

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

August 04, 2021

Letter ID: L0664940544

ALASKAN PHARMS LLC
DBA: ALASKAN PHARMS LLC.
PO BOX 88 NKI
NAUKATI BAY AK 99950

NOTICE

FEIN:	XX-XXX6026
Tax Type:	Marijuana Tax
License #:	13785
Tax Account #:	MRT-10089199-004
Tax Period End:	May 31, 2020

You are receiving this notice as a result of changes made to your account. There is no amount due and therefore no action needed unless you want to appeal the changes. The following may represent tax, penalties, and/or interest due after a review or an assessment. Interest and penalties are calculated through the date of this letter.

Tax	$211.65
Interest	10.04
Delinquency penalties	52.90
Less: payments applied	-274.59
Amount Due	**$0.00**

You can access your account, view the current balance, and schedule and confirm payments online by visiting: online-tax.alaska.gov. If the amount due is greater than or equal to $100,000.00, payment must be made either online or by wire transfer. If paying by wire transfer, you must notify the State of Alaska, Treasury Division by electronic mail at: dor.trs.cashmgmt@alaska.gov regarding the particulars of the transfer by 2:00 PM Alaska Time **the business day before** the wire transfer is initiated. The notice must include the payor name, payment amount, settlement date, tax type, and the purpose of the payment. If a payment was submitted previously, please advise us of the date and payment method. If payment is made by check, include the attached voucher with the payment to the address indicated on the voucher. Confirmation of payment is available by accessing your account at: online-tax.alaska.gov.

Interest is computed per Alaska Statute and can be found on the Alaska Legislature website: http://www.akleg.gov/basis/statutes.asp#43.05.225. Quarterly interest rates can be found on the Tax Division website: http://tax.alaska.gov/programs/interest.aspx. Interest will continue to accrue on the amounts shown above until paid in full. Failure-to-file and failure-to-pay penalties may continue to accrue at 5% per 30 day period up to a maximum of 25%.

If you disagree with the assessment, you must give notice and request an informal conference with the Department within 60 days after the mailing date of this letter. Use the appeal form available at: online-tax.alaska.gov and submit the completed form either online or mail it to the address above, Attention: Appeals. On the form you should state the Department action to which you object, the relief sought, the grounds for the objection, a brief summary of the facts at issue, and the legal authority that

AMCO received 10/22/2021

THE STATE of ALASKA
GOVERNOR MIKE DUNLEAVY

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

August 04, 2021

Letter ID: L1738682368

ALASKAN PHARMS LLC
DBA: ALASKAN PHARMS LLC.
PO BOX 88 NKI
NAUKATI BAY AK 99950

NOTICE

FEIN:	XX-XXX6026
Tax Type:	Marijuana Tax
License #:	13785
Tax Account #:	MRT-10089199-004
Tax Period End:	June 30, 2020

You are receiving this notice as a result of changes made to your account. There is no amount due and therefore no action needed unless you want to appeal the changes. The following may represent tax, penalties, and/or interest due after a review or an assessment. Interest and penalties are calculated through the date of this letter.

Tax	$541.35
Interest	24.34
Delinquency penalties	135.35
Less: payments applied	-700.57
Other credits and adjustments	-0.47
Amount Due	**$0.00**

You can access your account, view the current balance, and schedule and confirm payments online by visiting: online-tax.alaska.gov. If the amount due is greater than or equal to $100,000.00, payment must be made either online or by wire transfer. If paying by wire transfer, you must notify the State of Alaska, Treasury Division by electronic mail at: dor.trs.cashmgmt@alaska.gov regarding the particulars of the transfer by 2:00 PM Alaska Time **the business day before** the wire transfer is initiated. The notice must include the payor name, payment amount, settlement date, tax type, and the purpose of the payment. If a payment was submitted previously, please advise us of the date and payment method. If payment is made by check, include the attached voucher with the payment to the address indicated on the voucher. Confirmation of payment is available by accessing your account at: online-tax.alaska.gov.

Interest is computed per Alaska Statute and can be found on the Alaska Legislature website: http://www.akleg.gov/basis/statutes.asp#43.05.225. Quarterly interest rates can be found on the Tax Division website: http://tax.alaska.gov/programs/interest.aspx. Interest will continue to accrue on the amounts shown above until paid in full. Failure-to-file and failure-to-pay penalties may continue to accrue at 5% per 30 day period up to a maximum of 25%.

If you disagree with the assessment, you must give notice and request an informal conference with the Department within 60 days after the mailing date of this letter. Use the appeal form available at: online-tax.alaska.gov and submit the completed form either online or mail it to the address above, Attention: Appeals. On the form you should state the Department action to which you object, the relief

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address

Taxes Sept 2021

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26763605190

Year, Month, Day 2021-10-20 Post Office 999250 Amount $1,000.00 Clerk 10

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address

Taxes For Sept 21

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26763605201

Year, Month, Day 2021-10-20 Post Office 999250 Amount $855.50 Clerk 10

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address

Oct 21 Monthly Tax Payment

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26763605188

Year, Month, Day 2021-10-20 Post Office 999250 Amount $585.91 Clerk 10

AMCO received 10/22/2021

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: 12/28/20

License #/Type: 13785 Standard Cultivation

Designated Licensee: Regina Wright

AMCO Case#:

DBA: ALASKAN PHARMS, LLC

Premises Address: Block 7 Lot 8 Naukati, AK 99950

Mailing Address: PO Box 88 Naukati, AK 99950

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 12/23/2020, Alaskan Pharms LLC, 13785, Standard Cultivation, you were delinquent on your marijuana excise tax liability.

You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation may 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.

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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hoelscher

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA: Email

Date:

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: 3/23/21

License #/Type: 13785 Standard Cultivation

Designated Licensee: Regina Wright

AMCO Case#:

DBA: ALASKAN PHARMS, LLC

Premises Address: Block 7 Lot 8 Naukati, AK 99950

Mailing Address: PO Box 88 Naukati, AK 99950

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 2/17/2021, Alaskan Pharms LLC, 13785, Standard Cultivation, you were delinquent on your marijuana excise tax liability.

You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation may 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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***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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hoelscher

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA: Email

Date:

Davies, Jason M (CED)

From: John Wright <alaskahome633@yahoo.com>
Sent: Tuesday, March 23, 2021 9:54 AM
To: Davies, Jason M (CED)
Subject: Re: NOV Delinquency in Tax 13785

Categories: CHECK BACK AND COMPLETE

Hi Mr. Davies.
The balances due shown are part of the payment plan I've had with the revenue dept. for almost the whole last year.
Have not missed a payment.
There are only three payments remaining on the agreement. $790.00/mth is what is paid.
All other taxes are up to date.
Thank you,
Hope you are doing well.
John.

.

If you have questions concerning your Account Balance(s), please call 907-465-2385 or 907-465-2321.
If you need help with or have questions about Revenue Online please call 907-269-0041.

MARIJUANA TAX

Federal Employer Id	[redacted]
Monthly	MRT-10089199-004
My Balance	$2,115.68
Pending	$0.00
Pay Total Balance	$2,115.68
Payment Source	Setup

NAMES AND ADDRESSES

DBA Name	ALASKAN PHARMS LLC.
Legal Name	ALASKAN PHARMS LLC
Location Address	BLOCK 7 LOT 8 NAUKATI AK 99950
Mailing Address	PO BOX 88 NKI NAUKATI BAY AK 99950

I WANT TO...

View My Profile
Make a Payment
View My Payments
Amend a Return

PERIODS | HISTORY | MESSAGES[31] | LETTERS[12]

ATTENTION NEEDED[3] | ALL PERIODS

PERIODS REQUIRING ATTENTION

Period	Return Status			Tax	Penalty	Interest	Other	Credits	Balance	Messages
30-Jun-2020	Ontime-Processec	View Return	Pay	541.35	135.35	19.28	0.00	0.00	695.98	Make a Payn
31-May-2020	Ontime-Processec	View Return	Pay	211.65	52.90	8.06	0.00	0.00	272.61	Make a Payn
30-Apr-2020	Ontime-Processec	View Return	Pay	2,051.85	512.95	62.46	0.00	1,478.89	1,148.37	Make a Payn

3 Rows

On Tuesday, March 23, 2021, 8:32:27 AM AKDT, Davies, Jason M (CED) <jason.davies@alaska.gov> wrote:

Hello-

Attached to this email is a notice of violation(s). You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation may be brought to the Marijuana Control Board. AMCO Enforcement must receive a notification from the Department of Revenue to rescind this notice of violation.

NOTE: You must provide proof that,

1. **You are in a payment plan with the Department of Revenue regarding your most current violation.**

   OR

2. **Copy of receipt or screenshot of your department of revenue account that shows your taxes are at a zero balance.**

Please only reply to this email with one of the two request above.

Questions or concerns should be forwarded to amco.enforcement@alaska.gov.

Thank you,

Jason M. Davies
Criminal Justice Technician II

AMCO Enforcement
Alcohol & Marijuana Control Office
550 W. 7th Ave, Suite 1600

Anchorage, AK 99501
Office (907) 754-3410
jason.davies@alaska.gov

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: 6/23/21

License #/Type: 13785 Standard Cultivation

Designated Licensee: Regina Wright

AMCO Case#:

DBA: ALASKAN PHARMS, LLC

Premises Address: Block 7 Lot 8 Naukati, AK 99950

Mailing Address: PO Box 88 Naukati, AK 99950

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 6/16/2021, Alaskan Pharms LLC, 13785, Standard Cultivation, you were delinquent on your marijuana excise tax liability.

You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation may 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.

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. 7th Ave, Suite 1600
Anchorage, Alaska 99501
amco.enforcement@alaska.gov

Issuing Investigator: J. Hoelscher

Received by:

SIGNATURE:

SIGNATURE:

Delivered VIA: Email

Date:

Davies, Jason M (CED)

From: John Wright <alaskahome633@yahoo.com>
Sent: Wednesday, June 23, 2021 11:47 AM
To: Davies, Jason M (CED)
Subject: Re: NOV Delinquency in Tax 13785
Attachments: Recipt and tracking AMCO.PDF

Good Morning Mr. Davies.
Here are the receipts and tracking number showing the delinquent amount has been sent to Dept. of Revenue.
I will send a screenshot when it is posted on their site.
Thank you,
John Wright
Alaskan Pharms

On Wednesday, June 23, 2021, 8:55:10 AM AKDT, Davies, Jason M (CED) <jason.davies@alaska.gov> wrote:

Hello-

Attached to this email is a notice of violation(s). You have 30 days to resolve this matter with the Department of Revenue. If the delinquency is not resolved, an accusation may be brought to the Marijuana Control Board. **AMCO Enforcement must receive a notification from the Department of Revenue to rescind this notice of violation.**

NOTE: You must provide proof that,

1. **You are in a payment plan with the Department of Revenue regarding your most current violation.**

   OR

2. **Copy of receipt or screenshot of your department of revenue account that shows your taxes are at a zero balance.**

Please only reply to this email with one of the two request above.

Questions or concerns should be forwarded to amco.enforcement@alaska.gov.

Thank you,

Jason M. Davies
Criminal Justice Technician II

AMCO Enforcement
Alcohol & Marijuana Control Office
550 W. 7th Ave, Suite 1600

Anchorage, AK 99501
Office (907) 754-3410
jason.davies@alaska.gov

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 12:25 PM

Product	Qty	Unit Price	Price
Money Order			$1000.00
Serial#: 26859406656			
Money Order Fee			$1.75
Total			$1001.75
Money Order			$635.50
Serial#: 26859406667			
Money Order Fee			$1.75
Total			$637.25
Grand Total:			$1639.00
Cash			$1640.00
Change			-$1.00

****

UNITED STATES POSTAL SERVICE

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address

Taxes April 2021

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26859406656

Year, Month, Day 2021-06-21 Post Office 999210 Amount $1,000.00 Clerk 03

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 01:00 PM

Product	Qty	Unit Price	Price
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Anchorage, AK 99501			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 78			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Juneau, AK 99811			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 85			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Grand Total:			$15.90
Cash			$20.00
Change			-$4.10

****
USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address Taxes April 2021

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26859406667

Year, Month, Day 2021-06-21 Post Office 999210 Amount $635.50 Clerk 03

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 12:25 PM

Product	Qty	Unit Price	Price
Money Order			$1000.00
Serial#: 26859406656			
Money Order Fee			$1.75
Total			$1001.75
Money Order			$635.50
Serial#: 26859406667			
Money Order Fee			$1.75
Total			$637.25
Grand Total:			$1639.00
Cash			$1640.00
Change			-$1.00

****

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address Taxes April 2021

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26859406656

Year, Month, Day 2021-06-21 Post Office 999210 Amount $1,000.00 Clerk 03

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 01:00 PM

Product	Qty	Unit Price	Price
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Anchorage, AK 99501			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 78			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Juneau, AK 99811			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 85			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Grand Total:			$15.90
Cash			$20.00
Change			-$4.10

****
USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION

NOT NEGOTIABLE

Pay to

Address Taxes April 2021

KEEP THIS RECEIPT FOR YOUR RECORDS

Serial Number 26859406667

Year, Month, Day 2021-06-21 Post Office 999210 Amount $635.50 Clerk 03

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 12:25 PM

Product	Qty	Unit Price	Price
Money Order			$1000.00
Serial#: 26859406656			
Money Order Fee			$1.75
Total			$1001.75
Money Order			$635.50
Serial#: 26859406667			
Money Order Fee			$1.75
Total			$637.25
Grand Total:			$1639.00
Cash			$1640.00
Change			-$1.00

****

UNITED STATES POSTAL SERVICE

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Address Taxes April 2021

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Serial Number 26859406656

Year, Month, Day 2021-06-21 Post Office 999210 Amount $1,000.00 Clerk 03

UNITED STATES POSTAL SERVICE.

CRAIG
303 THOMPSON RD
CRAIG, AK 99921-9800
(800)275-8777

06/21/2021 01:00 PM

Product	Qty	Unit Price	Price
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Anchorage, AK 99501			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 78			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Priority Mail® 3-Day 1 Sm Flat Rate Env			$7.95
Juneau, AK 99811			
Flat Rate			
Expected Delivery Date Sat 06/26/2021			
Tracking #: 9505 5110 3716 1172 2663 85			
Insurance			$0.00
Up to $50.00 included			
Total			$7.95
Grand Total:			$15.90
Cash			$20.00
Change			-$4.10

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AMCO received 10/22/2021

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-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:	Alaskan Pharms LLC	**License Number:**	13785		
License Type:	Standard Marijuana Cultivation Facility				
Doing Business As:	Alaskan Pharms, LLC				
Premises Address:	Block 7 Lot 8				
City:	Naukati	**State:**	Alaska	**ZIP:**	99950

Section 2 – Individual Information

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

Name:	Regina Wright
Title:	Manager, 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.	RW
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.	RW
I certify that a notice of violation has **not** been issued to this license between July 1, 2020 and June 30, 2021.	

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).	RW

Received by AMCO 6.7.21

Alaska Marijuana Control Board

Form MJ-20: Renewal Application Certifications

Section 4 – Certifications & Waiver

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. JW

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. JW

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

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

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

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. JW

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. JW

I, John Wright, hereby waive my confidentiality rights under AS 43.05.230(a) and authorize the State of Alaska, Department of Revenue to disclose any and all tax information regarding this marijuana license to the Alcohol and Marijuana Control Office (AMCO) upon formal request as part of any official investigation as long as I hold, solely, or together with other parties, this marijuana license. JW

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

Notary Public in and for the State of Alaska

John Wright

Printed name of licensee

My commission expires: June 22, 2022

Subscribed and sworn to before me this 28th day of May, 2021.

Official Seal
JENNI J. REDDING
Notary Public-State of Alaska
My Comm. Expires
June 22, 2022

Received by AMCO 6.7.21

AMCO received 10/22/2021

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

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I, Regina Wright, hereby waive my confidentiality rights under AS 43.05.230(a) and authorize the State of Alaska, Department of Revenue to disclose any and all tax information regarding this marijuana license to the Alcohol and Marijuana Control Office (AMCO) upon formal request as part of any official investigation as long as I hold, solely, or together with other parties, this marijuana license. RW

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Regina Wright
Signature of licensee

Jenni J Redding
Notary Public in and for the State of Alaska

Regina Wright
Printed name of licensee

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Official Seal
JENNI J. REDDING
Notary Public-State of Alaska
My Comm. Expires
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Received by AMCO 6.7.21