

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD  
FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED  
11/22/2021  
ABC BOARD

LIQUOR LICENSE  
2022 - 2023  
**TEMPORARY**

775

LICENSE RENEWAL APPLICATION DUE  
DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT  
FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Package Store

LICENSE FEE: \$1,500.00

1150

CITY / BOROUGH: Nome  
Unorganized Borough

D/B/A: Nome Liquor Store  
303 Front Street

Mail Address:  
The North West Company (International), Inc.  
77 Main Street Attn. Legal Dept.  
Winnipeg, MB R3C 1A3

This license cannot be transferred without permission  
of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE  
ALCOHOLIC BEVERAGE CONTROL BOARD



DIRECTOR

04-900 (REV 7/21)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD  
FORM CONTROL

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ABC BOARD

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**COPY**

DIRECTOR

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04-900 (REV 7/21)



Alcohol and Marijuana Control Office  
550 W 7<sup>th</sup> Avenue, Suite 1600  
Anchorage, AK 99501  
[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)  
<https://www.commerce.alaska.gov/web/amco>  
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

**2022-2023 Master Checklist: Renewal License Application**

Doing Business As:	Nome Liquor Store	License Number:	775
License Type:	Package Store		
Examiner:	Kris S.	Transaction #:	100300887

Document	Received	Completed	Notes
AB-17: Renewal Application	11/1	11/22/21	
App and License Fees	11/1	11/22/21	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star / FAA Cert			
FP Cards & Fees / AB-08a	11/1	N/A	NOT NEEDED.
Late Fee			

Names on FP Cards:	
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	Yes	No	N/A
CBPL Entity Printout included?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business License Copy included?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Background(s) Completed & Date: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special Consideration: <u>NOV</u>			
LGB Sent Date: <u>11-22-21</u>			
LGB Deadline Date: _____			
LGB 1 Name: <u>City of Nome</u>			
LGB 2 Name: <u>N/A</u>			
<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed	<input type="checkbox"/> Waive
<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed	<input type="checkbox"/> Waive	<input type="checkbox"/> Protest
<input type="checkbox"/> Lapsed	<input type="checkbox"/> Waive	<input type="checkbox"/> Protest	<input type="checkbox"/> Lapsed



## Alaska Alcoholic Beverage Control Board

**Form AB-17b: 2022/2023 Package Store Renewal Application**

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2022 will be expired per AS 04.11.540, 3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

**Establishment Contact Information**

Licensee (Owner):	THE NORTH WEST COMPANY (INTERNATIONAL) INC.	License #:	775
License Type:	PACKAGE STORE		
Doing Business As:	NOME LIQUOR STORE		
Premises Address:	303 FRONT STREET		
Local Governing Body:	CITY OF NOME		
Community Council:	NONE		

If your mailing address has changed, write the NEW address below:

Mailing Address:	77 MAIN STREET				
City:	WINNIPEG	State:	MANITOBA	ZIP:	R3C-1A3

**Section 1 – Licensee Contact Information**

**Contact Licensee:** The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	AMANDA SUTTON	Contact Phone:	204-934-1756
Contact Email:	asutton@northwest.ca		

**Optional:** If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	ANNA ISON	Contact Phone:	204-934-1321
Contact Email:	license@northwest.ca / aison@northwest.ca		

Name of Contact:		Contact Phone:	
Contact Email:			

**Section 2 – Written Order Information**

Do you intend to sell alcoholic beverages and ship them to another location in response to written solicitation in calendar years 2022 and/or 2023?

AMCO

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YES

☐

NO

☒





## Form AB-17b: 2022/2023 License Renewal Application

## Section 3 – Entity or Community Ownership Information

**Sole Proprietors should skip this Section.**

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #.

<https://www.commerce.alaska.gov/cbp/main/search/entities>

Alaska CBPL Entity #:	120143
-----------------------	--------

**READ BEFORE PROCEEDING:** Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The **only exception** to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

**DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.**

- **Corporations** of any type including non-profit must list **ONLY** the following:
  - All shareholders who own 10% or more stock in the corporation
  - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- **Limited Liability Corporations**, of any type must list **ONLY** the following:
  - All Members with an ownership interest of 10% or more
  - All Managers (of the LLC, not the DBA) regardless of percentage owned
- **Partnerships** of any type, including *Limited Partnerships* must list **ONLY** the following:
  - Each Partner with an interest of 10% or more
  - All General Partners regardless of percentage owned

**Important Note:** All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. **If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.**

Name of Official:	NWC (US) HOLDINGS INC.			
Title(s):	SHAREHOLDER	Phone:		% Owned: 100
Mailing Address:	5901 BROKEN SOUND PARKWAY, NW, SUITE 500			
City:	BOCA RATON	State:	FLORIDA	ZIP: 33487-2791

Name of Official:	JAMES KEVIN PROCTOR			
Title(s):	DIRECTOR / PRESIDENT	Phone:	561-322-4805	% Owned: 0
Mailing Address:	825 AURELIA STREET			
City:	BOCA RATON	State:	FLORIDA	ZIP: 33486-3531

Name of Official:	KYLE HILL			
Title(s):	DIRECTOR / VICE-PRESIDENT	Phone:	907-273-4809	% Owned: 0
Mailing Address:	2835 DILIGENCE CIRCLE			
City:	ANCHORAGE	State:	ALASKA	ZIP: 99515

AMCO



## Form AB-17b: 2022/2023 License Renewal Application

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The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

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  - All shareholders who own 10% or more stock in the corporation
  - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- **Limited Liability Corporations, of any type** must list **ONLY** the following:
  - All Members with an ownership interest of 10% or more
  - All Managers (of the LLC, not the DBA) regardless of percentage owned
- **Partnerships of any type, including Limited Partnerships** must list **ONLY** the following:
  - Each Partner with an interest of 10% or more
  - All General Partners regardless of percentage owned

**Important Note:** All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. **If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.**

Name of Official:	AMANDA SUTTON				
Title(s):	SECRETARY	Phone:	204-934-1756	% Owned:	0
Mailing Address:	127 CREAMANS CRESCENT				
City:	WINNIPEG	State:	MANITOBA	ZIP:	R3R-322

Name of Official:	J				
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

AMCO





## Form AB-17b: 2022/2023 License Renewal Application

## Section 4 – Sole Proprietor Ownership Information

**Corporations, LLC's and Partnerships of ALL kinds should skip this section.**

**READ BEFORE PROCEEDING:** Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

**Important Note:** All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require.

If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected.

This individual is an: ☐ Applicant ☐ Affiliate

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an: ☐ Applicant ☐ Affiliate

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

## Section 5 – License Operation

Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated:

1. The license was regularly operated continuously throughout each year. (Year-round)

2020

☒

2021

☒

2. The license was only operated during a specific season each year. (Seasonal)

If your operation dates have changed, list them below:

\_\_\_\_\_ to \_\_\_\_\_

☐☐

3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.

☐☐

4. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendar years. A complete Form AB-29: Waiver of Operation Application

and corresponding fees must be submitted with this application for each calendar year during which the license was not operated.

If you have not met the minimum number of hours of operation in 2020 and/or 2021, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason.

☐☐

## Section 6 – Violations and Convictions

Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2020 or 2021?

Yes

☒

No

☐

**If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)**

**If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.**

AMCO

NOV 01 2021



Alaska Alcoholic Beverage Control Board

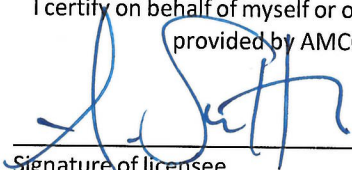
Form AB-17: 2022/2023 License Renewal Application

Section 7 – Certifications

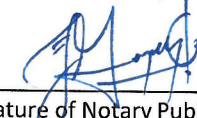
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.
- I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name from what is currently approved and on file with the Alcoholic Beverage Control Board.

I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

  
\_\_\_\_\_  
Signature of licensee  
AMANDA SUTTON  
\_\_\_\_\_  
Printed name of licensee



  
\_\_\_\_\_  
Signature of Notary Public  
Province Manitoba  
Notary Public in and for the State of: \_\_\_\_\_  
My commission expires: N/A

Subscribed and sworn to before me this 28<sup>th</sup> day of OCTOBER, 2021.

All renewal and supplemental forms are available online

**Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.**

FOR OFFICE USE ONLY

License Fee:	\$ <u>1500</u>	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ <u>1,800</u>

AMCO

NOV 01 2021



Department of Commerce, Community, and Economic Development  
**CORPORATIONS, BUSINESS & PROFESSIONAL  
LICENSING**

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## ENTITY DETAILS

### Name(s)

Type	Name
Legal Name	The North West Company (International) Inc.

**Entity Type:** Business Corporation

**Entity #:** 120143

**Status:** Good Standing

**AK Formed Date:** 12/18/2008

**Duration/Expiration:** Perpetual

**Home State:** DELAWARE

**Next Biennial Report Due:** 1/2/2024

**Entity Mailing Address:** 77 MAIN STREET, WINNIPEG, MB R3C1A3 CANADA

**Entity Physical Address:** 3830 OLD INTERNATIONAL AIRPORT ROAD, ANCHORAGE, AK  
99502-0901

### Registered Agent

**Agent Name:** WALTER PICKETT

**Registered Mailing Address:** 3830 OLD INTERNATIONAL AIRPORT RD STE 200, ANCHORAGE, AK  
99502

**Registered Physical Address:** 19211 UPPER SKYLINE DRIVE, EAGLE RIVER, AK 99577

### Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	AMANDA SUTTON	Secretary	



AK Entity #	Name	Titles	Owned
	J. KEVIN PROCTOR	Director, President	
	JOHN KING	Treasurer, Director	
	KYLE HILL	Director, Vice President	
	NWC (U.S.) HOLDINGS INC.	Shareholder	100.00

## Filed Documents

Date Filed	Type	Filing	Certificate
12/18/2008	Creation Filing	<a href="#">Click to View</a>	<a href="#">Click to View</a>
12/17/2009	Biennial Report	<a href="#">Click to View</a>	
3/22/2010	Agent Change	<a href="#">Click to View</a>	
2/06/2012	Biennial Report	<a href="#">Click to View</a>	
5/16/2013	Certificate of Compliance		<a href="#">Click to View</a>
12/27/2013	Biennial Report	<a href="#">Click to View</a>	
9/17/2014	Correction	<a href="#">Click to View</a>	<a href="#">Click to View</a>
12/29/2015	Biennial Report	<a href="#">Click to View</a>	
3/29/2016	Agent Change	<a href="#">Click to View</a>	
5/11/2017	Entity Address Change	<a href="#">Click to View</a>	
11/08/2017	Biennial Report	<a href="#">Click to View</a>	
4/22/2019	Agent Change	<a href="#">Click to View</a>	
8/21/2019	Change of Officials	<a href="#">Click to View</a>	
12/16/2019	Biennial Report	<a href="#">Click to View</a>	
5/15/2020	Correction	<a href="#">Click to View</a>	<a href="#">Click to View</a>
5/26/2020	Certificate of Compliance		<a href="#">Click to View</a>
10/27/2020	Change of Officials	<a href="#">Click to View</a>	
8/26/2021	Change of Officials	<a href="#">Click to View</a>	
9/21/2021	Change of Officials	<a href="#">Click to View</a>	
11/15/2021	Biennial Report	<a href="#">Click to View</a>	

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Department of Commerce, Community, and Economic Development  
**DIVISION OF CORPORATIONS, BUSINESS &  
PROFESSIONAL LICENSING**

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## LICENSE DETAILS

**License #:** 992626

[Print Business License](#)

**Business Name:** NOME LIQUOR STORE

**Status:** Active

**Issue Date:** 07/22/2013

**Expiration Date:** 12/31/2022

**Mailing Address:** 77 MAIN STREET  
ATTN: LEGAL DEPT  
WINNIPEG, MB R3C1A3, CANADA

**Physical Address:** 303 FRONT STREET  
NOME, AK 99762

## Owners

THE NORTH WEST COMPANY (INTERNATIONAL) INC.

## Activities

Line of Business	NAICS	Professional License #
42 - Trade	445310 - BEER, WINE, AND LIQUOR STORES	
42 - Trade	445120 - CONVENIENCE STORES	

## Endorsements

End #	Issue	Renew	Expiration	Action End	Action Note	Address
1	10/23/2018	11/5/2020	12/31/2022			303 FRONT ST, NOME, AK 99762

## License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.