



Review

Selected Account: FOIA(b)(6)

Your application has been filed with the Alabama Medical Cannabis Commission. Your reference code is 1650.

File Date : 03/03/2023 3:46 PM

Your transaction ID is: FOIA(b)(6)

If you do not receive email notifications, please check your spam folder. You must print or save this page as a PDF as part of your redacted filing.

Request for Business Application Information

Request Number: 0383

General Applicant Information

Applicant Name : Alabama Medical Grow, LLC.

Applying as: Business Entity

Trade Name (DBAs) : AMG

Identification: FEIN Number Type

Federal Tax Identification Number : 920637469

Business Entity Name : Alabama Medical Grow, LLC.

Business Entity Type : Limited Liability Company

Secretary of: 001043859 State Entity ID Number

Federal Business Code No : 111419

Date of Qualification, Organization or Incorporation : 10/10/2022

Applicant Street Address

Street: 17195 US HIGHWAY 98

Unit No / Apt No

City: FOLEY

County: 02-Baldwin

State: Alabama

Zip Code: 36535

Address Verified?: Yes

## Applicant Mailing Address

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✓ **Street:** 213 DRAPER TO  
N DR

✓ **Unit No /** : STE A ATTN: J  
**Apt No** ULIE MITCHEL  
L

✓ **City:** RIDGELAND

✓ **State:** Mississippi

✓ **Zip Code:** 39157

✓ **Address Verified?:** Yes

**Applicant** :  
**Website**

✓ **Applicant** : FOIA(b)(6)  
**Email** [REDACTED]  
**Address**

✓ **Applicant** : 2283130827  
**Phone**  
**Number**

✓ **Do you have a management service agreement in place?:**

No

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✓ **Is the applicant: (1) at least 51% owned by (or, in the case of a corporation, 51% of the shares belong to) members of any minority group (as defined by 20-2A-51(b)), and (2) managed and controlled in its daily operations by members of any minority group?** :No

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## Primary Contact Person

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✓ **First Name:** Julie

✓ **Last Name:** Mitchell

✓ **Title:** Attorney

✓ **Phone** : 6017074039  
**Number**

✓ **Email:** jmitchell@hatla  
wfirm.com

✓ **Street:** 213 DRAPER TO  
N DR

✓ **Unit No /** : STE A  
**Apt No**

✓ **City:** RIDGELAND

✓ **State:** Mississippi

✓ **Zip Code:** 39157

✓ **Address Verified?:** Yes

## License Information

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✓ **License Type:** Integrated Facility

## Facility Information

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# Facility Information

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✓ **Facility Type** : Cultivation Facility

## Physical Address

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✓ **Street:** 17195 US HIGH WAY 98

**Unit No / Apt No** :

✓ **City:** FOLEY

✓ **County:** 02-Baldwin

✓ **State:** Alabama

✓ **Zip Code:** 36535

✓ **Address Verified?** : Yes

## Facility Information Questions

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✓ **Applicant's interest in property where proposed facility is located** : Agreement Contingent on Receipt of License

✓ **Is this facility under construction?** : Yes

✓ **Estimated date of construction completion** : 01/01/2024

✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will commence operations at this facility** : 180

✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will reach full capacity at this facility** : 365

✓ **Does the applicant verify that this proposed facility will be in a permissible location, if applicable, and will maintain compliance with all State and local laws, resolutions and ordinances?** : Yes

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✓ **Facility Type** : Processing Facility

## Physical Address

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✓ **Street:** 17195 US HIGH WAY 98

**Unit No / Apt No** :

✓ **City:** FOLEY

✓ **County:** 02-Baldwin

✓ **State:** Alabama

✓ **Zip Code:** 36535

✓ **Address** : Yes  
Verified?

## Facility Information Questions

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✓ **Applicant's interest in** : Agreement Contingent on  
**property where proposed** Receipt of License  
**facility is located**

✓ **Is this facility under** : Yes  
**construction?**

✓ **Estimated date of** : 01/01/2024  
**construction**  
**completion**

✓ **The number of days, if awarded a license, within which the** : 180  
**Applicant reasonably projects it will commence operations**  
**at this facility**

✓ **The number of days, if awarded a license, within which the** : 365  
**Applicant reasonably projects it will reach full capacity at**  
**this facility**

✓ **Does the applicant verify that this proposed facility will be in a** : Yes  
**permissible location, if applicable, and will maintain compliance with**  
**all State and local laws, resolutions and ordinances?**

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✓ **Facility** : Secure Transport  
**Type** er Facility

## Physical Address

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✓ **Street:** 17195 US HIGH  
WAY 98

**Unit No /** :  
**Apt No**

✓ **City:** FOLEY

✓ **County:** 02-Baldwin

✓ **State:** Alabama

✓ **Zip Code:** 36535

✓ **Address** : Yes  
Verified?

## Facility Information Questions

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✓ **Applicant's interest in** : Agreement Contingent on  
**property where proposed** Receipt of License  
**facility is located**



- ✓ **Is this facility under construction?** : Yes
- ✓ **Estimated date of construction completion** : 01/01/2024
- ✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will commence operations at this facility** : 180
- ✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will reach full capacity at this facility** : 365
- ✓ **Does the applicant verify that this proposed facility will be in a permissible location, if applicable, and will maintain compliance with all State and local laws, resolutions and ordinances?** : Yes

- 
- ✓ **Facility Type** : Dispensing Site (Retail Facility)
  - ✓ **Dispensing Site Premises**: Stand Alone Building

## Physical Address

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- ✓ **Street:** 18267 US HIGH WAY 98
- ✓ **Unit No / Apt No** :
- ✓ **City:** FOLEY
- ✓ **County:** 02-Baldwin
- ✓ **State:** Alabama
- ✓ **Zip Code:** 36535
- ✓ **Address Verified?** : Yes

## Facility Information Questions

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- ✓ **Applicant's interest in property where proposed facility is located** : Agreement Contingent on Receipt of License
- ✓ **Is this facility under construction?** : No
- ✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will commence operations at this facility** : 90
- ✓ **The number of days, if awarded a license, within which the Applicant reasonably projects it will reach full capacity at this facility** : 180

- ✓ Does the applicant verify that this proposed facility will be in a permissible location, if applicable, and will maintain compliance with all State and local laws, resolutions and ordinances? : Yes

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## Ownership of Applicant

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- ✓ Select type of record: Entity
- ✓ Does this entity have ownership interest in the applicant? : Yes

## Entity

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- ✓ Entity Name : MC Holdings LLC
- ✓ Entity Type : Limited Liability Company
- ✓ Are there individuals with direct or indirect ownership interest in this entity? : Yes
- ✓ FEIN: 921408085
- ✓ Ownership Percentage of the Applicant : 49

## Physical Address

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- ✓ Street: 178 MAIN ST
- ✓ Unit No / Apt No : STE 301
- ✓ City: BILOXI
- ✓ State: Mississippi
- ✓ Zip Code: 39530
- ✓ Address Verified? : Yes

## Primary Contact/ Responsible Person

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- ✓ First Name : Thomas
  - ✓ Last Name : Moore
  - ✓ Title: Owner
  - ✓ Phone Number : FOIA(b)(6)
  - ✓ Email Address : FOIA(b)(6)
  - ✓ Street Address : FOIA(b)(6)
  - ✓ Unit No / Apt No : FOIA(b)(6)
  - ✓ City: FOIA(b)(6)
  - ✓ State: FOIA(b)(6)
  - ✓ Zip Code: FOIA(b)(6)
  - ✓ Address Verified? : Yes
-

✓ **Select type of record:** Entity

✓ **Does this entity have ownership interest in the applicant?** : Yes

## Entity

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✓ **Entity Name** : J&L, LLC

✓ **Entity Type** : Limited Liability Company

✓ **Are there individuals with direct or indirect ownership interest in this entity?** : Yes

✓ **FEIN:** 900083042

✓ **Ownership Percentage of the Applicant** : 51

## Physical Address

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✓ **Street:** FOIA(b)(6)

**Unit No / Apt No** :

✓ **City:** FOIA(b)(6)

✓ **State:** FOIA(b)(6)

✓ **Zip Code:** FOIA(b)(6)

✓ **Address Verified?** : Yes

## Primary Contact/ Responsible Person

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✓ **First Name** : Larry

✓ **Last Name** : Wireman

✓ **Title:** Owner

✓ **Phone Number** : FOIA(b)(6)

✓ **Email Address** : FOIA(b)(6)

✓ **Street Address** : FOIA(b)(6)

**Unit No / Apt No** :

✓ **City:** FOIA(b)(6)

✓ **State:** FOIA(b)(6)

✓ **Zip Code:** FOIA(b)(6)

✓ **Address Verified?** : Yes

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## Cannabis Industry Entities

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- ✓ Is any individual or entity below connected to any entity that is directly or indirectly involved in the cannabis industry, including, but not limited to, the cultivation, processing, packaging, labeling, testing, transporting, or sale of cannabis or medical cannabis, either in Alabama or any other jurisdiction? :Yes
- (1) an individual with an ownership interest in the applicant;  
(2) the spouse, parent, or child of an individual with an ownership interest in the applicant; or  
(3) an entity with an ownership interest in the applicant.

- ✓ Select : Individual  
Individual  
or Entity:

## Individual

- ✓ Legal First Name : Thomas
- ✓ Legal Last Name : Moore
- Suffix:
- ✓ Cannabis Entity Name : FOIA(b)(6)
- ✓ Entity Type : Limited Liability Company
- ✓ Connection: Individual to Cannabis Entity
- ✓ Role in Cannabis Entity : Equity interest owner
- ✓ Percentage of ownership in cannabis entity : 33.33

## Cannabis Entity's Physical Address

- ✓ Street: FOIA(b)(6)
- Unit No / Apt No :
- ✓ City: FOIA(b)(6)
- ✓ State: FOIA(b)(6)
- ✓ Zip Code: FOIA(b)(6)
- ✓ Address Verified? : Yes

## Cannabis Entity's Primary Contact/Responsible Person

- ✓ First Name : Julie
- ✓ Last Name : Mitchell
- ✓ Title: Attorney
- ✓ Phone Number : 6017074039
- ✓ Email Address : jmitchell@hatlawfirm.com
- ✓ Street Address : 213 DRAPER TON DR
- ✓ Unit No / Apt No : STE A
- ✓ City: RIDGELAND
- ✓ State: Mississippi
- ✓ Zip Code: 39157
- ✓ Address Verified? : Yes

- ✓ **Select** : Individual  
**Individual  
or Entity:**

## Individual

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- ✓ **Legal First Name** : Winston
- ✓ **Legal Last Name**: Ceasear
- Suffix:**
- ✓ **Cannabis Entity Name** : FOIA(b)(6)
- ✓ **Entity Type** : Limited Liability Company
- ✓ **Connection:** Individual to Cannabis Entity
- ✓ **Role in Cannabis Entity** : Equity interest owner
- ✓ **Percentage of ownership in cannabis entity** : 33.33

## Cannabis Entity's Physical Address

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- ✓ **Street:** FOIA(b)(6)
- Unit No / Apt No** :
- ✓ **City:** FOIA(b)(6)
- ✓ **State:** FOIA(b)(6)
- ✓ **Zip Code:** FOIA(b)(6)
- ✓ **Address Verified?** : Yes

## Cannabis Entity's Primary Contact/Responsible Person

---

- ✓ **First Name** : Julie
- ✓ **Last Name** : Mitchell
- ✓ **Title:** Attorney
- ✓ **Phone Number** : 6017074039
- ✓ **Email Address** : jmitchell@hatlawfirm.com
- ✓ **Street Address** : 213 DRAPER TON DR
- ✓ **Unit No / Apt No** : STE A
- ✓ **City:** RIDGELAND
- ✓ **State:** Mississippi
- ✓ **Zip Code:** 39157
- ✓ **Address Verified?** : Yes

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## Questions and Attestations

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- ✓ **Has the applicant, any ownership entity, or any cannabis entity connected to any individual or entity with an ownership interest in the applicant ever applied for or been granted any commercial license or certificate (not related to cannabis industry) issued by a licensing board or commission, either in Alabama or any other jurisdiction?** : NO
-

✓ Was any commercial license or certificate disclosed above denied, restricted, suspended, revoked, or non-renewed? : NO

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✓ Has the applicant, any ownership entity, or any cannabis entity connected to any individual or entity with an ownership interest in the applicant, ever been authorized to participate in the cannabis or medical cannabis industry, licensed (i.e., a "licensee" as defined in Chapter 1 of the AMCC Rules), or provided similar status in any other jurisdiction? : NO

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✓ During the last 5 years has there been any disciplinary measures taken regarding any cannabis or medical cannabis industry license of the applicant or any entity affiliated with the applicant? : NO

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✓ Has the applicant, any ownership entity, or any cannabis entity connected to any individual or entity with an ownership interest in the applicant, within the last ten (10) years, filed or been served with a complaint or other notice by any governmental body, regarding a delinquency in the payment of, or a dispute over the filings concerning the payment of, any tax required under federal, state, or local law? : NO

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✓ Has the applicant filed, or had filed against it, any proceeding for bankruptcy within the past 7 years?: NO

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✓ Is the applicant currently, or has it been in the past 10 years, a defendant in litigation involving any of its business practices? : NO

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✓ Is any public official of any unit of government: : NO  
(1) an owner (directly or indirectly) of any financial or beneficial interest in the applicant;  
(2) a creditor of the applicant;  
(3) a holder of any debt instrument issued by the applicant; or (4) a holder of, or interested party in, any contractual or service relationship with the applicant?

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✓ Is the spouse, parent or child of a public official of any unit of government: : NO  
(1) an owner (directly or indirectly) of any financial or beneficial interest in the applicant;  
(2) a creditor of the applicant;  
(3) a holder of any debt instrument issued by the applicant; or  
(4) a holder of, or interested party in, any contractual or service relationship with the applicant?

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✓ Has any owner, director, board member, or individual with a controlling interest in the applicant ever been indicted for, charged with, arrested for, convicted of, pled guilty or nolo contendere to, or forfeited bail concerning any felony or controlled substance-related misdemeanor, not including traffic violations, regardless of whether the offense has been reversed on appeal or otherwise? : NO

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- ✓ Has any leader, secure transport driver, or secure transport passenger of the applicant received a criminal conviction within the last eight years for any of the following: : NO  
(1) any indictable offense;  
(2) any offense involving stolen property or vehicles;  
(3) fraud relating to any business any driver has owned, in whole or part, or in which the driver has been employed;  
(4) stolen property, or other offense of similar nature;  
(5) operation of a motor vehicle while under the influence of a controlled substance, or offense of similar nature; or (6) any offense involving possession, distribution or trafficking in, any illegal substance?

What is the applicant's anticipated or actual number of employees (including all facilities) at the prospective commencement of operations and during the first five calendar years thereafter?

FOIA(b)(6) [REDACTED] [REDACTED] [REDACTED]  
[REDACTED] [REDACTED] [REDACTED]

- ✓ Does the applicant verify that it has the ability to maintain adequate minimum levels (\$2,000,000) of liability and casualty insurance, as required by § 20-2A-53(a)(2), Code of Alabama 1975 (as amended)? :Yes

- ✓ Does the applicant verify that each of its proposed dispensing sites is at least 1000 feet from any school, daycare, or childcare facility? : YES

- ✓ Does the applicant consent as required by § 20-2A-55(d), Code of Alabama 1975 (as amended) to the inspections, examinations, searches, and seizures contemplated by § 20-2A-52(a)(3), Code of Alabama 1975 (as amended), which shall specifically extend to all secure transport vehicles of the applicant? : YES

- ✓ Does the applicant verify that neither it nor its leadership have any economic interest in any other license or applicant for license under the Act? (See § 20-2A-55(e), Code of Alabama 1975 (as amended)) : YES

- ✓ I attest that this application is truthful and complete based on the best available information as of the date of filing. : YES

✓ Signature: Julie Mitchell

✓ Signature Date: 12/30/2022

## Documents

- ✓ Resume or Curriculum Vitae of Individuals with Ownership Interest: 1650\_01\_OwnershipResumes.pdf (./api/documents/khRfrogG3...

✓ <b>Residency of Owners:</b>	1650_02_Residency.pdf (./api/documents/YFgkVRBk-/downloa...
✓ <b>Commercial Horticulture or Agronomic Production Experience of Owners:</b>	0383_3_Horticulture.pdf (./api/documents/bK9hcvPjK/downlo...
✓ <b>Criminal Background Check:</b>	1650_04_Backgrounds.pdf (./api/documents/7y5ZL5MGt/dow...
✓ <b>Minimum Performance Bond Requirement:</b>	1650_05_FormM.pdf (./api/documents/KIJ7mLAdK/download)
✓ <b>Minimum Liquid Assets Requirement:</b>	1650_06_MinimumAssets.pdf (./api/documents/a470FwFqJ/d...
✓ <b>Demonstration of Sufficient Capital:</b>	1650_07_SufficientCapital.pdf (./api/documents/XJnSsQ_MK/...
✓ <b>Minimum Operating Capital Requirement:</b>	1650_08_MinimumOperatingCapital.pdf (./api/documents/kGU...
✓ <b>Financial Statements:</b>	0383_9_Financial Statements.pdf (./api/documents/CbpYHpzq...
✓ <b>Tax Plan:</b>	0383_10_TaxPlan.pdf (./api/documents/UvyJ1gT9S/download)
✓ <b>Business Formation Documents:</b>	1650_11_BusinessFormation.pdf (./api/documents/yO-R7uDK...
✓ <b>Business License and Authorization of Local Jurisdictions:</b>	1650_12_BusinessLicandLocalAuth.pdf (./api/documents/Bx4...
✓ <b>Business Plan:</b>	1650_13_BusinessPlan.pdf (./api/documents/ZXckLh5A2/dow...
✓ <b>Evidence of Business Relationship with other Licensees and Prospective Licensees:</b>	1650_14_BusinessRelationships.pdf (./api/documents/5yr13Gl...
✓ <b>Coordination of Information from Registered Certifying Physicians:</b>	0383_15_Physician Info.pdf (./api/documents/MPalfZStR/dow...
✓ <b>Point-of-Sale Responsibilities:</b>	0383_16_POS.pdf (./api/documents/mlINXycLJ/download)
✓ <b>Confidentiality of Patient Information:</b>	0383_17_Confidentiality.pdf (./api/documents/rsYDOQqLZ/do...
✓ <b>Money Handling and Taxes:</b>	0383_18_Money.pdf (./api/documents/KSvSUuUL/download)
✓ <b>Standard Operating Plan and Procedures:</b>	0383_19_SOPs.pdf (./api/documents/8ScKJx3-T/download)
✓ <b>Policies and Procedures Manual:</b>	0383_20_Policies.pdf (./api/documents/b8UmMiTq2/download)



✓ <b>Production and Manufacturing Process:</b>	1650_21_ProductionandManufacturing.pdf (./api/documents/8...
✓ <b>Machinery and Equipment:</b>	1650_22_Equipment.pdf (./api/documents/HXueZn26t/downlo...
✓ <b>Receiving and Shipping Plan:</b>	0383_23_Receiving and Shipping.pdf (./api/documents/8sWrQ...
✓ <b>Secure Transport Vehicles:</b>	0383_24_Secure Transport Vehicles.pdf (./api/documents/O6v...
✓ <b>Compliance with Alabama Public Service Commission Requirements:</b>	0383_25_Compliance with Commission.pdf (./api/documents/...
✓ <b>Commercial Drivers' License:</b>	0383_26_Commerical Drivers Licenses.pdf (./api/documents/P...
✓ <b>Fleet Summary:</b>	0383_27_FleetSummary.pdf (./api/documents/zeG0-ie39/dow...
✓ <b>Care and Maintenance of Vehicles:</b>	0383_28_VehicleMaintenance.pdf (./api/documents/9YnrGQP...
✓ <b>Route Plans:</b>	0383_29_RoutePlans.pdf (./api/documents/HnC_nMcpr/downl...
✓ <b>Plan for Segregation of Processes Within and Transportation Between Facilities:</b>	0383_30_Segregation.pdf (./api/documents/HjHMijNC3/downl...
✓ <b>Facilities:</b>	1650_31_Facilities.pdf (./api/documents/HvtmqgGIT/download)
✓ <b>Engineering Plans and Specifications:</b>	0383_32_Engineering Plan.pdf (./api/documents/jL_qJKTOB/d...
✓ <b>Security Plan:</b>	0383_33_Security Plan.pdf (./api/documents/chUfh98nZ/down...
✓ <b>Personnel:</b>	1650_34_PersonnelRoster.pdf (./api/documents/IISbB_ANu/do...
✓ <b>Business Leadership Credentials:</b>	0383_35_Leadership Credentials.pdf (./api/documents/CBb7A...
✓ <b>Employee Handbook:</b>	0383_36_EmployeeHandbook.pdf (./api/documents/AbxLuXgH...
✓ <b>Secure Transport Drivers:</b>	1650_37_SecureTransportDrivers.pdf (./api/documents/KZGaz...
✓ <b>Drivers' Manual:</b>	0383_38_DriversManual.pdf (./api/documents/mY9qoDfny/do...
✓ <b>Quality Control and Quality Assurance Plan:</b>	0383_39_QualityControl.pdf (./api/documents/l_LDz3sOD/dow...

- ✓ **Contamination and Recall Plan:** 0383\_40\_Recall.pdf (./api/documents/ZD9BixC3J/download)

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- ✓ **Marketing and Advertising Plan:** 1650\_41\_MarketingandAdvertising.pdf (./api/documents/nMg...

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- ✓ **Website and Social Media:** 0383\_42\_SocialMedia.pdf (./api/documents/BTckMmbE9/dow...

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- ✓ **Ownership Entity Individuals (if applicable):** FORM I - FINAL.pdf (./api/documents/hbMcqUw8V/download)

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- ✓ **Proof of Minimum Liability and Casualty Insurance:** 13.11 - Insurance letter.pdf (./api/documents/pQBn3nWPh/do...

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- ✓ **Affidavit - Entity Applicant:** Form K Final.pdf (./api/documents/GOR3LP-UP/download)

## Payments

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- ✓ **Payment Options:** ACH
-

All redactions are made in effort to preserve individual privacy and security.

The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 1 - Ownership Resume/Curriculum Vitae

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

FORM A: OWNERSHIP RESUME / CURRICULUM VITAE

**Alabama Medical Grow LLC**

Business License Applicant Name

**Integrated Facility**

License Type

**Thomas Moore**

Individual with Ownership Interest in Applicant

**49% through MC Holdings LLC**

Individual's Ownership Percentage in Applicant

**Residential History**

*Provide all residential addresses, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.*

**FOIA (b)(6)**

07/2007

Date Resided From (MM/YYYY)

Current

Date Resided To (MM/YYYY)

Residential Street Address

City

State

Zip

Date Resided From (MM/YYYY)

Date Resided To (MM/YYYY).

Residential Street Address

City

State

Zip

Date Resided From (MM/YYYY)

Date Resided To (MM/YYYY)

Residential Street Address

City

State

Zip

Date Resided From (MM/YYYY)

Date Resided To (MM/YYYY)

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Date Resided From (MM/YYYY)

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Date Resided To (MM/YYYY)

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Residential Street Address

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City

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State

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Zip

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Date Resided From (MM/YYYY)

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Date Resided To (MM/YYYY)

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**Education**

*Provide all institutions of higher education attended; attach additional form(s) if necessary.*

<u>William Carey University</u> Institution	<u>Hattisburg</u> City	<u>MS</u> State
<u>05/1994</u> Date Attended From (MM/YYYY)	<u>05/1997</u> Date Attended To (MM/YYYY)	<u>Bachelor's Degree</u> Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received

**Employment History**

*Provide all employers, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.*

<u>Moore Companies</u> Employer	<u>Thomas Moore</u> Contact Person	<u>228-313-0827</u> Telephone
<u>178 Main Street, Ste 301</u> Business Address		
<u>Biloxi</u> City	<u>MS</u> State	<u>39530</u> Zip
<u>05/2010</u> Date Employed From (MM/YYYY)	<u>Current</u> Date Employed To (MM/YYYY)	

New Hope/O'Keefe Foundation  
Employer

Justin O'Keefe  
Contact Person

228-209-0442  
Telephone

911 Porter Avenue  
Business Address

Ocean Springs  
City

MS  
State

39564  
Zip

05/1995  
Date Employed From (MM/YYYY)

04/2010  
Date Employed To (MM/YYYY)

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Date Employed From (MM/YYYY)

\_\_\_\_\_  
Date Employed To (MM/YYYY)

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Date Employed From (MM/YYYY)

\_\_\_\_\_  
Date Employed To (MM/YYYY)

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Date Employed From (MM/YYYY)

\_\_\_\_\_  
Date Employed To (MM/YYYY)

Employer	Contact Person	Telephone
Business Address		
City	State	Zip
Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)	

Employer	Contact Person	Telephone
Business Address		
City	State	Zip
Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)	

Employer	Contact Person	Telephone
Business Address		
City	State	Zip
Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)	

Employer	Contact Person	Telephone
Business Address		
City	State	Zip
Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)	



FORM A: OWNERSHIP RESUME / CURRICULUM VITAE

Alabama Medical Grow LLC

Business License Applicant Name

Integrated Facility

License Type

Winston Jerome Ceasear

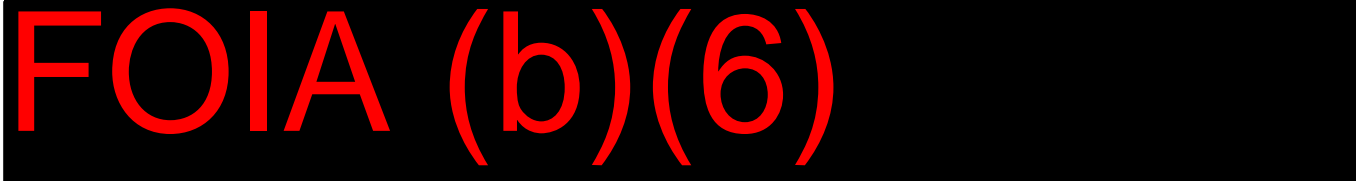
Individual with Ownership Interest in Applicant

49% through MC Holdings LLC

Individual's Ownership Percentage in Applicant

Residential History

Provide all residential addresses, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.



06/2019

Date Resided From (MM/YYYY)

Current

Date Resided To (MM/YYYY)

15409 Orleans Dr.

Residential Street Address

Biloxi

City

MS

State

39532

Zip

08/1993

Date Resided From (MM/YYYY)

06/2019

Date Resided To (MM/YYYY).

Residential Street Address

City

State

Zip

Date Resided From (MM/YYYY)

Date Resided To (MM/YYYY)

Residential Street Address

City

State

Zip

Date Resided From (MM/YYYY)

Date Resided To (MM/YYYY)

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Residential Street Address

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City

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State

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Zip

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Date Resided From (MM/YYYY)

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Date Resided To (MM/YYYY)

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Residential Street Address

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State

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Date Resided From (MM/YYYY)

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Date Resided From (MM/YYYY)

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Date Resided To (MM/YYYY)

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Residential Street Address

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City

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State

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Zip

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Date Resided From (MM/YYYY)

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Date Resided To (MM/YYYY)

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**Education**

*Provide all institutions of higher education attended; attach additional form(s) if necessary.*

<b>St. Martin High School</b> Institution	<b>Ocean Springs</b> City	<b>MS</b> State
<b>08/2001</b> Date Attended From (MM/YYYY)	<b>05/2004</b> Date Attended To (MM/YYYY)	<b>High School</b> Degree Received
 Institution	 City	 State
 Date Attended From (MM/YYYY)	 Date Attended To (MM/YYYY)	 Degree Received
 Institution	 City	 State
 Date Attended From (MM/YYYY)	 Date Attended To (MM/YYYY)	 Degree Received
 Institution	 City	 State
 Date Attended From (MM/YYYY)	 Date Attended To (MM/YYYY)	 Degree Received
 Institution	 City	 State
 Date Attended From (MM/YYYY)	 Date Attended To (MM/YYYY)	 Degree Received

**Employment History**

*Provide all employers, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.*

<b>Moore Companies</b> Employer	<b>Thomas Moore</b> Contact Person	<b>228-313-0827</b> Telephone
<b>178 Main Street, Ste 301</b> Business Address		
<b>Biloxi</b> City	<b>MS</b> State	<b>39530</b> Zip
<b>01/2020</b> Date Employed From (MM/YYYY)	<b>Current</b> Date Employed To (MM/YYYY)	

**Southern Elite Fitness**  
Employer

**Richard Hawthorne**  
Contact Person

**228-365-6048**  
Telephone

**10380 Auto Mall Parkway**  
Business Address

**D'Iberville**  
City

**MS**  
State

**39540**  
Zip

**10/2014**  
Date Employed From (MM/YYYY)

**01/2019**  
Date Employed To (MM/YYYY)

**Ingells Shipyard**  
Employer

**N/A**  
Contact Person

**N/A**  
Telephone

**1000 Jerry Street, Pe' Highway**  
Business Address

**Pascagoula**  
City

**MS**  
State

**39581**  
Zip

**07/2014**  
Date Employed From (MM/YYYY)

**10/2014**  
Date Employed To (MM/YYYY)

**CSC**  
Employer

**N/A**  
Contact Person

**N/A**  
Telephone

**Keesler Air Force Base**  
Business Address

**Biloxi**  
City

**MS**  
State

**39534**  
Zip

**08/2008**  
Date Employed From (MM/YYYY)

**01/2014**  
Date Employed To (MM/YYYY)

Employer

Contact Person

Telephone

Business Address

City

State

Zip

Date Employed From (MM/YYYY)

Date Employed To (MM/YYYY)

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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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FORM A: OWNERSHIP RESUME / CURRICULUM VITAE

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated Facility  
License Type

Larry Wireman  
Individual with Ownership Interest in Applicant

51% (I&L, LLC)  
Individual's Ownership Percentage in Applicant

Residential History

*Provide all residential addresses in reverse chronological order for 15 years prior to date of application;*

**FOIA (b)(6)**

\_\_\_\_\_  
Date Resided From (MM/YYYY) Current  
\_\_\_\_\_  
Date Resided To (MM/YYYY)

**FOIA (b)(6)**

12/2019 \_\_\_\_\_ 10/2022 \_\_\_\_\_  
Date Resided From (MM/YYYY) Date Resided To (MM/YYYY).

**FOIA (b)(6)**

10/2009 \_\_\_\_\_ 12/2019 \_\_\_\_\_  
Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

**FOIA (b)(6)**

12/2005 \_\_\_\_\_ 10/2009 \_\_\_\_\_  
Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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**Education**

Provide all institutions of higher education attended; attach additional form(s) if necessary.

<u>Morehead State</u> Institution	<u>Morehead</u> City	<u>KY</u> State
<u>08/1962</u> Date Attended From (MM/YYYY)	<u>05/1963</u> Date Attended To (MM/YYYY)	<u>N/A</u> Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received

**Employment History**

Provide all employers, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.

<u>Caribe Realty, Inc.</u> Employer	<u>John Price</u> Contact Person	<u>251-747-1081</u> Telephone
<u>28103 Perdido Beach Blvd Ste B-100</u> Business Address		
<u>Orange Beach</u> City	<u>AL</u> State	<u>36561</u> Zip
<u>08/2000</u> Date Employed From (MM/YYYY)	<u>Current</u> Date Employed To (MM/YYYY)	



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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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**FORM A: OWNERSHIP RESUME / CURRICULUM VITAE**

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated Facility  
License Type

Judy Wireman  
Individual with Ownership Interest in Applicant

51% (I&L, LLC)  
Individual's Ownership Percentage in Applicant

**Residential History**

*Provide all residential addresses, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.*

**FOIA (b)(6)**

10/2022  
Date Resided From (MM/YYYY)

Current  
Date Resided To (MM/YYYY)

**FOIA (b)(6)**

12/2019  
Date Resided From (MM/YYYY)

10/2022  
Date Resided To (MM/YYYY)

**FOIA (b)(6)**

10/2009  
Date Resided From (MM/YYYY)

12/2019  
Date Resided To (MM/YYYY)

**FOIA (b)(6)**

12/2005  
Date Resided From (MM/YYYY)

10/2009  
Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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Residential Street Address

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City State Zip

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Date Resided From (MM/YYYY) Date Resided To (MM/YYYY)

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**Education**

*Provide all institutions of higher education attended; attach additional form(s) if necessary.*

<b><u>University of Southern Mississippi</u></b> Institution	<b><u>Hattisburg</u></b> City	<b><u>MS</u></b> State
<b><u>08/1975</u></b> Date Attended From (MM/YYYY)	<b><u>05/1979</u></b> Date Attended To (MM/YYYY)	<b><u>Fashion Merchandising</u></b> Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received
_____	_____	_____
Institution	City	State
_____	_____	_____
Date Attended From (MM/YYYY)	Date Attended To (MM/YYYY)	Degree Received

**Employment History**

*Provide all employers, in reverse chronological order, for 15 years prior to date of application; attach additional form(s) if necessary.*

<b><u>Caribe Realty, Inc.</u></b> Employer	<b><u>Stan Szapiel</u></b> Contact Person	<b><u>251-747-1232</u></b> Telephone
<b><u>28103 Perdido Beach Blvd Ste B-100</u></b> Business Address		
<b><u>Orange Beach</u></b> City	<b><u>AL</u></b> State	<b><u>36561</u></b> Zip
<b><u>04/2002</u></b> Date Employed From (MM/YYYY)	<b><u>Current</u></b> Date Employed To (MM/YYYY)	

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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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Employer	Contact Person	Telephone
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Business Address

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City	State	Zip
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Date Employed From (MM/YYYY)	Date Employed To (MM/YYYY)
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All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 2 – Residency of Owners

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

~~3/3/23~~ attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date



Records indicating that a majority of ownership of Applicant is attributable to an individual or individuals with proof of residence in AL for a continuous period of no less than 15 preceding years.

## Exhibit 2 - Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell      attorney  
Printed Name of Verifying Individual      Title of Verifying Individual

Julie B. Mitchell      3/3/23  
Signature of Verifying Individual      Verification Date

**License Type: Integrated Facility**

**See below for Judy Wireman's (Majority Member of J&L LLC) Alabama Voter Registration Records establishing proof of residency.**

FOIA (b)(6)

## Exhibit 2 - Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell attorney  
Printed Name of Verifying Individual Title of Verifying Individual

Julie B. Mitchell 3/3/23  
Signature of Verifying Individual Verification Date

License Type: Integrated Facility

See below for Larry Wireman's (Member of J&L LLC) Alabama Voter Registration Records establishing proof of residency.

FOIA (b)(6)

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 3 – Commercial Horticulture or Agronomical Experience

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date



J&L, LLC is comprised of two members, Larry Wireman (Manager) and Judy Wireman (Majority member). The Wiremans bring a plethora of experience to the Cannabis industry in Alabama.

Since 2012 Judy and Larry have operated Republic Energy, LLC, an Alabama Limited Liability Company. This company has been dedicated to the conversion of renewable resources into energy and the use of the byproducts for agriculture. Republic Energy products have been used in several farms in south Alabama for fertilizer.

Also, as a natural continuation of the technology developed in our Foley production facility, our team has been working on creating innovative techniques to purify drinking water and clean algae overgrowth in bodies of water.

Our family of companies have also accomplished some of the most recognizable developments in Coastal Alabama. Caribe Resort and Turquoise Place were developed by our J&L Manager, Larry Wireman. Long before establishing himself as a staple in the Coastal Alabama development community, Larry worked his family's 100-acre corn and soybean farm in Salyersville, Kentucky from age five to sixteen. Two years ago, Larry bought a 600-acre corn farm in Breathitt County, Kentucky.

Larry went on to own a pipe company that contracted on major water and oil and delivery systems (Alaskan Pipeline). He also owned an industrial HVAC company, essential to our proposed facility control. Our family of companies also includes an information technology company that writes software and constructs computer hardware for several applications. Currently, we are developing a water leak detection system. Part and parcel to developing a successful Medical Cannabis Integrated Facility will be the ability to develop and maintain high level IT systems to monitor the environment, especially water systems. We have the existing staff with experience doing just that.

In addition to the 50 plus years of experience that Judy and Larry, J&L, LLC have in industries that are essential to a medical cannabis facility, we have partnered with MC Holdings, LLC, whose members bring impressive resumes of land and real estate development to the table. Tom Moore, majority owner of MC Holdings, LLC, has owned Moore Companies for 12 years, specializing in real estate development in Coastal Communities. Winston Ceasear, part-

License Type: INTEGRATED FACILITY

owner of MC Holdings, LLC, is a Black, Air Force Veteran, who has worked closely with Moore Companies in development and management.

These companies are uniquely suited to fund, operate, and manage an Alabama Medical Cannabis Integrated Facility because of their wealth of experience in the community, ability to bring in specialists to accomplish safe and effective operations of Medical Cannabis Facilities, and connections in the Cannabis Community across the country.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 4 - Background Checks

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**4.1 – Applicant Verification**

See Attachment 1.

**4.2 – Alabama Background Checks**

All owners of entities comprising Applicant (J&L LLC and MC Holdings, LLC) have submitted Form C and fingerprint cards to the Alabama Law Enforcement Agency, Background Check Division. See Attachment 2 for delivery confirmations.

**4.3 – National Background Checks**

All owners of entities comprising Applicant have submitted Form D and fingerprint cards to the FBI, Background Check Division. See Attachment 2 for delivery confirmations.

**4.4 – Owner Verifications**

See Attachments 3 for Form E, owner verifications.

## Exhibit 4 – Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**4.1 – Form B: Applicant Verification**

See below.

**FORM B: BACKGROUND CHECK APPLICANT VERIFICATION**

Alabama Medical Grow, LLC  
Business License Applicant Name

Integrated Facility  
License Type

Provide the name and title of each individual identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) (i.e., each owner, shareholder, director, board member, and individual with an economic interest in the Applicant). Attach additional forms if necessary.

NAME	ROLE (select all that apply)
Thomas Moore	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
Winston Ceasear	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
Larry Wireman	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
Judy Wireman	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
	<input type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
	<input type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
	<input type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
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	<input type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant
	<input type="checkbox"/> Owner <input type="checkbox"/> Shareholder <input type="checkbox"/> Director <input type="checkbox"/> Board Member <input type="checkbox"/> Individual with Economic Interest in Applicant

**Applicant Verification:** The undersigned hereby verifies that the individuals listed hereinabove (and attached, as necessary) are all of the individuals identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) with respect to the Applicant. The undersigned further verifies that each individual listed hereinabove (and attached, as necessary) has requested a state criminal background check from the Alabama Law Enforcement Agency (ALEA) and a national criminal background check from the FBI.

Julie B. Mitchell  
Printed Name of Verifying Individual  
Julie B. Mitchell  
Signature of Verifying Individual

attorney  
Title of Verifying Individual  
3/3/23  
Verification Date

## Exhibit 4 – Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



**Confirmation of delivery of Fingerprints and FORM C and D**

See below for confirmation of delivery to FBI and Alabama Law Enforcement Agency for:

- Thomas Moore
- Winston Ceasear
- Judy Wireman
- Larry Wireman

# Proof of Delivery

Dear Customer,

This notice serves as proof of delivery for the shipment listed below.

**Tracking Number**

1ZX30W464493399400

**Weight**

0.40 LBS

**Service**

UPS Next Day Air®  
Saturday Delivery

**Shipped / Billed On**

12/23/2022

**Delivered On**

12/28/2022 11:42 A.M.

**Delivered To**

MONTGOMERY, AL, US

**Received By**

ROGERS

**Left At**

Dock

Please print for your records as photo and details are only available for a limited time.

Sincerely,

UPS

Tracking results provided by UPS: 12/29/2022 1:22 P.M. EST



JULIE B. MITCHELL | ATTORNEY

213 Draperon Drive, Suite A  
Ridgeland, MS 39157

P.O. Box 14188  
Jackson, MS 39236

Main: (601) 608 6300

Direct: (601) 707 4039

Fax: (601) 362 3642

[jmitchell@hatlawfirm.com](mailto:jmitchell@hatlawfirm.com)

December 13, 2022

**FBI CJIS Division – Summary Request  
1000 Custer Hollow Road  
Clarksburg, WV 26306**

***Via Overnight Delivery***

**Re: Winston Ceasear Summary Request and Fingerprints**

To Whom It May Concern:

Please find attached our client's, Winston Ceasear, fingerprints and confirmation of completion and payment of the summary request application through the FBI's online portal.

If you have any further questions, please contact:

Julie Mitchell, J.D., LL.M.  
213 Draperon Drive, Suite A Ridgeland, MS 39157  
P.O. Box 14188 Jackson, MS 39236  
Main: (601) 608 6300  
Direct: (601) 707 4039  
Fax: (601) 362 3642  
[jmitchell@hatlawfirm.com](mailto:jmitchell@hatlawfirm.com)

Sincerely,

HAGWOOD & TIPTON LAW FIRM, P.C.

By: 

Julie B. Mitchell, Esq., LL.M Healthlaw

FOIA (b)(6)

FOIA (b)(6)

FedEx® Tracking

[Track Another Shipment](#) [Help](#)

**DELIVERED**  
**Wednesday**  
12/14/2022 at 9:56 am  
Signed for by: R.JENKINS  
[Obtain Proof of delivery](#)

**DELIVERY STATUS**  
Delivered

**TRACKING ID**  
770764080746

**FROM**  
Ridgeland, MS US  
**Label Created**  
12/13/2022 12:46 PM

**PACKAGE RECEIVED BY**  
**FEDEx**  
RICHLAND, MS  
12/13/2022 6:25 PM

**IN TRANSIT**  
BRIDGEPORT, WV  
12/14/2022 9:38 AM

**OUT FOR DELIVERY**  
BRIDGEPORT, WV  
12/14/2022 9:38 AM

**DELIVERED**  
CLARKSBURG, WV US  
**DELIVERED**  
12/14/2022 at 9:56 AM

[View travel history](#)

How was your delivery?  
☆☆☆☆☆

Want updates on this shipment? Enter your email and we will do the rest!

YOUR EMAIL

**SUBMIT**

[Manage Delivery](#)

Shipment facts

Shipment overview

**TRACKING NUMBER** 770764080746  
**DELIVERED TO** Shipping/Receiving  
**SHIP DATE** 12/13/22  
**STANDARD TRANSIT** 12/14/22 before 10:30 am  
**ACTUAL DELIVERY** 12/14/22 at 9:56 am

Services

**SERVICE** FedEx Priority Overnight  
**TERMS** Shipper  
**SPECIAL HANDLING SECTION** Deliver Weekday

Package details

**WEIGHT** 0.5 lbs / 0.23 kgs  
**TOTAL PIECES** 1  
**TOTAL SHIPMENT WEIGHT** 0.5 lbs / 0.23 kgs  
**PACKAGING** FedEx Envelope

[Back to top](#)

Travel history

Ascending

**TIME ZONE**  
Local Scan Time

Tuesday, 12/13/2022	12:46 PM	• Shipment information sent to FedEx	
	4:03 PM	• Picked up Tendered at FedEx Office	MADISON, MS
	4:04 PM	• Shipment arriving On-Time	MADISON, MS
	6:25 PM	• Picked up	RICHLAND, MS
	9:35 PM	• Left FedEx origin facility	RICHLAND, MS

6:20 AM	At destination sort facility	MOON TOWNSHIP, PA
9:12 AM	At local FedEx facility	BRIDGEPORT, WV
9:38 AM	On FedEx vehicle for delivery	BRIDGEPORT, WV
9:38 AM	At local FedEx facility	BRIDGEPORT, WV
9:56 AM	Delivered	CLARKSBURG, WV

↑ Back to top

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 Corporate Responsibility/About/Corporate social responsibility (<https://www.fedex.com/en-responsibility/about/corporate-social-responsibility.html>)  
 Newsroom (<https://newsroom.fedex.com/>)  
 Contact Us (<https://www.fedex.com/en-us/customer-support/contact-us.html>)

**MORE FROM FEDEX**

FedEx Compatible (<https://www.fedex.com/en-us/compatible.html>)  
 FedEx Developerus/home.html (<https://developer.fedex.com/api/en-Portal>)  
 FedEx Logistics (<https://www.fedex.com/en-us/logistics.html>)  
 FedEx Cross Border (<https://www.fedex.com/en-us/cross-border.html>)  
 ShopRunner (<https://www.fedex.com/en-us/shoprunner.html>)

**LANGUAGE**

Change Country/Territory/local-on-home (<https://www.fedex.com/?Country/Territory/local-on-home>)

**FOLLOW FEDEX** [✉ \(https://www.fedex.com/en-us/email.html\)](https://www.fedex.com/en-us/email.html) [f \(https://www.facebook.com/FedEx/\)](https://www.facebook.com/FedEx/)  
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ORIGIN ID: JANA (801) 608-6300  
JULIE B. MITCHELL  
HAGWOOD AND TIPTON PC  
213 DRAPER TON DRIVE  
SUITE A  
RIDGELAND, MS 39157  
UNITED STATES US

SHIP DATE: 13DEC22  
ACTWGT: 0.10 LB  
CAD: 258592039/NET4530

BILL SENDER

TO **ATTN: ELECTRONIC SUMMARY REQUEST**  
**FBI CJIS DIVISION**  
**1000 CUSTER HOLLOW ROAD**

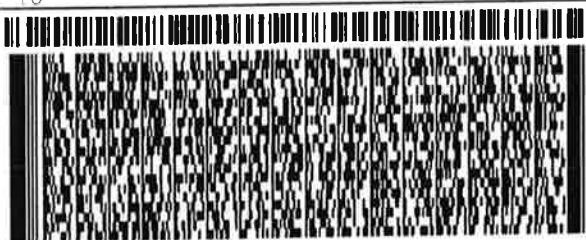
**CLARKSBURG WV 26306**

(304) 625-2000  
INV:  
PO

REF: J MITCHELL - MOORE CO (WG)

DEPT:

581JG18A97AFC20

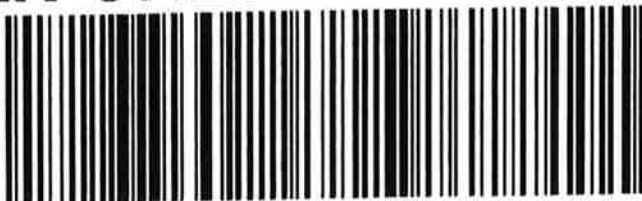


**WED - 14 DEC 10:30A**  
**PRIORITY OVERNIGHT**

TRK# 7707 6408 0746  
0201

**XN CKBA**

**26306**  
**wv-us PIT**



After printing this label:  
1. Use the Print button on this page to print your label to your laser or inkjet printer.  
2. Fold the Print page along the horizontal line.  
3. Place label in shipping pouch and attach to your shipment so that the barcodes portion of the label can be read and scanned.  
Warning: Use only the provided 9703 label for shipping. Using a photocopy or a label not intended for this purpose may result in additional shipping charges. Shipping with this label requires a minimum of 16.000 FEDEX authorized packages.  
Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on [fedex.com](http://fedex.com). FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery or misrouting, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income, interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits. See current FedEx Service Guide.





JULIE B. MITCHELL | ATTORNEY

213 Draperon Drive, Suite A  
Ridgeland, MS 39157

P.O. Box 14188  
Jackson, MS 39236

Main: (601) 608 6300

Direct: (601) 707 4039

Fax: (601) 362 3642

[jmitchell@hatlawfirm.com](mailto:jmitchell@hatlawfirm.com)

December 13, 2022

**FBI CJIS Division – Summary Request  
1000 Custer Hollow Road  
Clarksburg, WV 26306**

***Via Overnight Delivery***

**Re: Thomas Moore Summary Request and Fingerprints**

To Whom It May Concern:

Please find attached our client's, Thomas Moore, fingerprints and confirmation of completion and payment of the summary request application through the FBI's online portal.

If you have any further questions, please contact:

Julie Mitchell, J.D., LL.M.  
213 Draperon Drive, Suite A Ridgeland, MS 39157  
P.O. Box 14188 Jackson, MS 39236  
Main: (601) 608 6300  
Direct: (601) 707 4039  
Fax: (601) 362 3642  
[jmitchell@hatlawfirm.com](mailto:jmitchell@hatlawfirm.com)

Sincerely,

HAGWOOD & TIPTON LAW FIRM, P.C.

By:   
Julie B. Mitchell, Esq., LL.M Healthlaw

FOIA (b)(6)

FOIA (b)(6)

FedEx® Tracking

[Track Another Shipment](#) [Help](#)

DELIVERED

**Wednesday**

12/14/2022 at 9:56 am

Signed for by: R.JENKINS

↓ [Obtain Proof of delivery](#)

Want updates on this shipment? Enter your email and we will do the rest!

YOUR EMAIL

**SUBMIT**

[Manage Delivery](#) ↓

DELIVERY STATUS

Delivered ✓

TRACKING ID

770763828791 ✎ ☆

**FROM**  
Ridgeland, MS US  
**Label Created**  
12/13/2022 12:34 PM

**PACKAGE RECEIVED BY**  
**FEDEx**  
RICHLAND, MS  
12/13/2022 6:25 PM

**IN TRANSIT**  
BRIDGEPORT, WV  
12/14/2022 9:38 AM

**OUT FOR DELIVERY**  
BRIDGEPORT, WV  
12/14/2022 9:38 AM

**DELIVERED**  
CLARKSBURG, WV US  
**DELIVERED**  
12/14/2022 at 9:56 AM

↓ [View travel history](#)

## Shipment facts

### Shipment overview

<b>TRACKING NUMBER</b>	770763828791
<b>DELIVERED TO</b>	Shipping/Receiving
<b>SHIP DATE</b> ⓘ	12/13/22
<b>STANDARD TRANSIT</b> ⓘ	12/14/22 before 10:30 am
<b>ACTUAL DELIVERY</b>	12/14/22 at 9:56 am

### Services

<b>SERVICE</b>	FedEx Priority Overnight
<b>TERMS</b>	Shipper
<b>SPECIAL HANDLING SECTION</b>	Deliver Weekday

### Package details

<b>WEIGHT</b>	0.5 lbs / 0.23 kgs
<b>TOTAL PIECES</b>	1
<b>TOTAL SHIPMENT WEIGHT</b>	0.5 lbs / 0.23 kgs
<b>PACKAGING</b>	FedEx Envelope

↑ [Back to top](#)

## Travel history

Ascending ↓

**TIME ZONE**  
Local Scan Time ↓

Date	Time	Event	Location
Tuesday, 12/13/2022	12:34 PM	Shipment information sent to FedEx	
	4:03 PM	Picked up Tendered at FedEx Office	MADISON, MS
	4:05 PM	Shipment arriving On-Time	MADISON, MS
	6:25 PM	Picked up	RICHLAND, MS
	9:26 PM	Left FedEx origin facility	RICHLAND, MS

6:20 AM	• At destination sort facility	MOON TOWNSHIP, PA
9:12 AM	• At local FedEx facility	BRIDGEPORT, WV
9:38 AM	• On FedEx vehicle for delivery	BRIDGEPORT, WV
9:38 AM	• At local FedEx facility	BRIDGEPORT, WV
9:56 AM	📍 Delivered	CLARKSBURG, WV

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 Careers(<https://careers.fedex.com/fedex/>)

FedEx Blog(<https://www.fedex.com/en-us/blog.html>)  
 Corporate Responsibility/about/corporate-social-responsibility.html)  
 Newsroom(<https://newsroom.fedex.com/>)  
 Contact Us(<https://www.fedex.com/en-us/customer-support/contact-us.html>)

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 FedEx Logistics(<https://www.fedex.com/en-us/logistics.html>)  
 FedEx Cross-Border(<https://www.fedex.com/en-us/cross-border.html>)  
 ShopRunner(<https://www.fedex.com/en-us/shoprunner.html>)

**LANGUAGE**

🌐 [Change Country/Territory/Location=home](https://www.fedex.com/?ChangeCountryTerritoryLocation=home)

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 (<https://twitter.com/fedex>) (<https://www.instagram.com/fedex/>) (<https://www.linkedin.com/company/fedex>)  
 (<https://www.youtube.com/fedex>) (<https://www.pinterest.com/FedEx/>)

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ORIGIN ID: JANA (601) 608-8300  
JULIE B. MITCHELL  
HAGWOOD AND TIPTON PC  
213 DRAPER TON DRIVE  
SUITE A  
RIDGELAND, MS 39157  
UNITED STATES US

SHIP DATE: 13DEC22  
ACTWGT: 0.10 LB  
CAD: 256592039/INET4530

BILL SENDER

TO **ATTN: ELECTRONIC SUMMARY REQUEST**  
**FBI CJIS DIVISION**  
**1000 CUSTER HOLLOW ROAD**

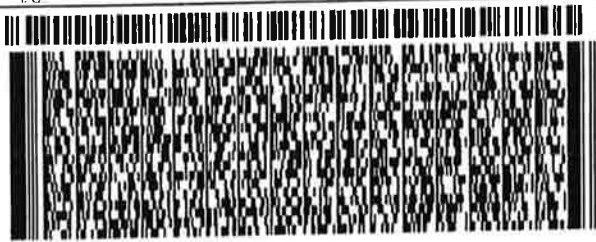
**CLARKSBURG WV 26306**

(304) 625-2000  
INV:  
PO

REF: J MITCHELL - MOORE CO

DEPT

581.63.937.FE2D

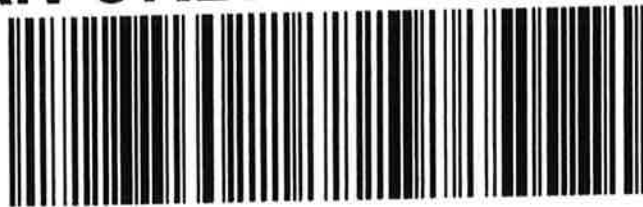


**WED - 14 DEC 10:30A**  
**PRIORITY OVERNIGHT**

TRK# **7707 6382 8791**  
0201

**XN CKBA**

**26306**  
**WV-US PIT**



After printing this label:

1. Use the "Print" button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

We thank you for using the online shipping label for shipping. Using a photocopy of this label to shipping purposes is prohibited. Please do not use this label for shipping purposes. Use of this document constitutes your agreement to the terms and conditions of the current FedEx Service Guide. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including the actual value of the package, loss of sales, income, interest, profit, attorney's fees, costs, and other forms of damage, whether direct, incidental, consequential, or special, is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. White: claims must be filed within strict time limits, see current FedEx Service Guide.

FOIA (b)(6)

FOIA (b)(6)



FOIA (b)(6)

9:46



tools.usps.com



# USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

## 9470109109375501658981



Copy



Add to Informed Delivery

### Latest Update

Your item has been delivered and is available at a PO Box at 4:58 am on December 30, 2022 in MONTGOMERY, AL 36102.

Get More Out of USPS Tracking:



[USPS Tracking Plus®](#)



**Delivered**

**Delivered, PO Box**

MONTGOMERY, AL 36102

December 30, 2022, 4:58 am

[See All Tracking History](#)

**Text & Email Updates**





**DELIVERED**

Friday

12/30/2022 at 9:49 am

Signed for by: R.JENKINS

↓ Obtain Proof of delivery

**DELIVERY STATUS**

Delivered

**TRACKING ID**

392789544727



**FROM**

FOLEY, AL US

*Label Created*

12/28/2022 6:53 PM

**PACKAGE RECEIVED BY FEDEX**

MOBILE, AL

12/29/2022 4:48 PM

**IN TRANSIT**

BRIDGEPORT, WV

12/30/2022 9:03 AM

**OUT FOR DELIVERY**



FOIA (b)(6)

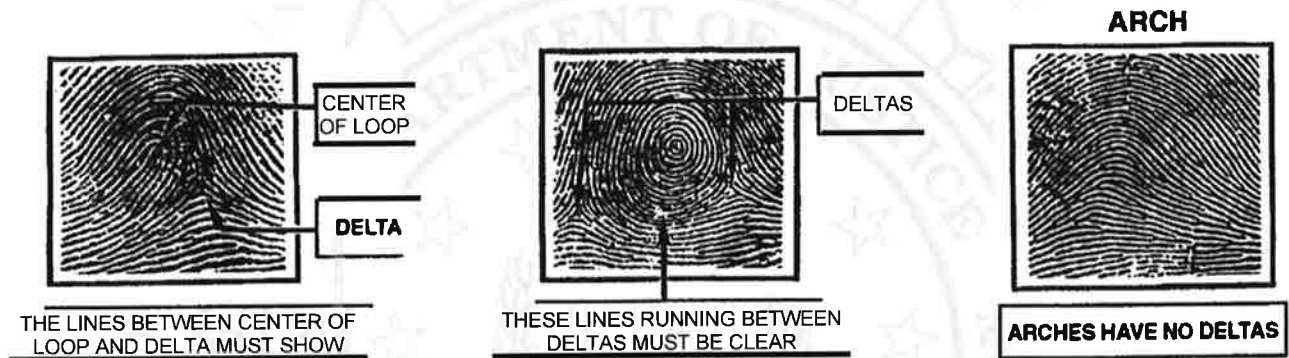
AL ST 8-27-1 et seq.

## Please Note

License Type: Integrated Facility

Training information relative to the procedures for properly recording fingerprints can be obtained from your nearest FBI Field Office or the Criminal Justice Information Services Division in Clarksburg, WV.

It is suggested that each newly recorded fingerprint card be examined to ensure that the impressions are fully rolled and clearly recorded, bearing in mind the following:



While every effort is made to process every fingerprint card submitted, in some instances this is not possible. The FBI fully recognizes the occurrences of situations which challenge the ingenuity of the identification officer to secure identifiable impressions.

Your earnest cooperation is solicited in obtaining the best possible impressions in each block on each fingerprint card. By doing so, you are rendering a vital service and making a major contribution to all agencies participating in the fingerprint exchange program.



# USPS Tracking

License Type: Integrated Facility

Track

USPS

Details

Tracking Id	EQ93332635us
Carrier Name	Ups
Status	Delivered
Status Brief	Delivered, Individual Picked Up At Postal Facility
Last Update Time	12:17 Pm
Last Update Date	March 1, 2023
Status Location	Clarksburg, Wv, 26301

CALL CENTER

March 1, 2023 12:17 pm	<b>Delivered, Individual Picked Up at Postal Facility</b> CLARKSBURG WV 26301
March 1, 2023 11:47 am	<b>Available for Pickup</b> CLARKSBURG WV 26301
March 1, 2023 11:16 am	<b>Arrived at Post Office</b> CLARKSBURG WV 26301
March 1, 2023 11:15 am	<b>Arrived at USPS Destination Facility</b> CLARKSBURG WV 26301
February 28, 2023 5:16 pm	<b>Arrived at USPS Regional Origin Facility</b> MOBILE AL DISTRIBUTION CENTER ANNEX
February 28, 2023 4:28 pm	<b>Departed Post Office</b> ORANSE BEACH AL 36561
February 28, 2023 1:15 am	<b>USPS in possession of item</b> ORANSE BEACH AL 36561

### Get Tracking Notification & USPS History

Now Get Live Update of Each Tracking Id you added after Login. Enter your USPS Tracking Number to Dashboard Tracking Widget and Auto Email Tracking Notification will be started when your page get updates.

Sign Up Login

#### Check Here Main Topics

Why USPS Tracking not Updated?

How to track Without Tracking Number?

How to find USPS tracking number?

USPS Tracking Numbers and Formats

Contact Customer Care Service

When to consider USPS package is delaying ?

Check fake Tracking number

Type of USPS Status

USPS Text Tracking

USPS Price Calculator

Calculate USPS Delivery Time

USPS Plus Tracking

How long USPS kept records for tracking?

### USPS tracking Down or Experiencing issues : Why and How to solve ?

If you are experiencing issues with USPS tracking not working, there are several things you can try

- 1. Technical Glitch** : Sometimes USPS Api has to be updated due to very huge usages repeatedly. So due to security reasons, USPS API needs to be patched new security updates. So many time USPS.Com scheduled to down and patch new updates, and some time USPS.Com not showing any tracking results with popping with "Technical Error" or "Check After some time".
- 2. Wait a bit longer** : Sometimes, there may be delays in updating tracking information, especially during peak seasons or when there are natural disasters. So, it may be worth waiting a day or two to see if there are any updates.
- 3. Check the tracking number** : Make sure you have entered the tracking number correctly. Double-check the number and try entering it again. You may check format here [USPS Tracking Numbers and Formats](#).
- 4. Contact Customer Care Service** : If you have waited for a reasonable amount of time and still haven't seen any updates, you can contact USPS customer service for assistance. They may be able to provide you with more information about your package's status or help you troubleshoot any issues you are experiencing.
- 5. Consider requesting a refund or filing a claim** : If your package is significantly delayed or lost, you may be eligible for a refund or can file a claim with USPS. You can find more information about the refund and claim process on the USPS website.

### What is USPS Tracking Numbers and Formats ?

The USPS Tracking Number Formats for parcels, shipment and post tracking vary according to the mail or services chosen by you in USPS. Here We have given all Tracking number formats by USPS.

- 1. New Domestic USPS Service** : 34 numeric i.e. 4200 0000 0000 0000 0000 0000 0000 72
- 2. USPS Tracking Format** : 22 digit numbers i.e. 9400 1000 0000 0000 0000 00
- 3. USPS Priority Mail Format** : 22 digit numbers i.e. 9205 5000 0000 0000 0000 00
- 4. Certified Mail** : 22 digit numbers i.e. 9407 3000 0000 0000 0000 00
- 5. Collect on Delivery** : 22 digit numbers i.e. 9303 3000 0000 0000 0000 00
- 6. Global Express Guaranteed** : 10 digit Numeric i.e. 82 000 000 00
- 7. USPS Priority Mail Express International** : 13 digit alpha numeric i.e. EC 000 000 000 US
- 8. Priority Mail Express** : 9270 1000 0000 0000 0000 00 or EA 000 000 000 US
- 9. Priority Mail International** : 13 digit alpha numeric i.e. CP 000 000 000 US
- 10. Registered Mail** : 22 digit numeric i.e. 9208 8000 0000 0000 0000 00
- 11. Signature Confirmation** : 22 numeric i.e. 8202 1000 0000 0000 0000 00

USPS tracking numbers are unique codes assigned to packages and mail classes sent through the United States Postal Service. They consist of a combination of letters and numbers and are used to monitor the progress of a shipment from the time it is sent to the time it is delivered.

There are several formats for USPS tracking numbers, including

- 1. 20-digit tracking number** : This format is used for Express Mail and Priority Mail shipments. The number starts with two letters followed by eight digits, two letters and eight digits. For example: "EC 000 000 000 US".

- 22-digit tracking number:** This format is used for **First-Class Package Service** and **Package Services** shipments. The number starts with two letters, and ends with 11 digits. For example: "R000 1P99 999 999 999".
- 13-digit tracking number:** This format is used for **Parcel Select** and some **Retail Ground** shipments. The number starts with two letters and ends with 11 digits. For example: "RR 123 456 789 US".

It is important to note that not all USPS services include tracking, and some international shipments may have tracking numbers that are different from these formats.

#### Helpful Tracking Number research of USPS look like

We have mentioned USPS Tracking Mix of lots. With that you can check Origin and Destination even from Tracking Number format. Lets understand.

- 9400\*\* Format** – 22 digit numbers. Means this package moving domestic within USA or in some case within CANADA.
- EH00000000US** – This is international transit of your package from USA to foreign country in the world.
- EE123456789MX** – 13 digit alpha numeric. means this packages arriving from Mexico. Last two digit indicates origin Country.
- 4200\*\*** – 34 digit numeric. means this packages arriving from USA to USA.
- LM987654321CA** – Acceptance From CANADA POST to USPS. Pickup in CANADA and Delivery in US.
- CP987654321PL** – What that mean is Pick from POLAND and CP refers to Custom clearing may and through custom it will reach to destination in US.

#### How to track a USPS Package & mails Without Tracking Number?

Unfortunately, it is not possible to track a USPS package or mail without a tracking number. The tracking number is a unique identifier that allows you to track the delivery status of your package or mail. If you have lost the tracking number or if it was not provided to you, you may try contacting the sender to request it or check the shipping information and receipt. You can also check your USPS account if you have one, or reach out to the local post office where the package was sent or delivered to inquire about its status.

If you lost USPS tracking number, you may try above section helpful to avail again your lost tracking number. Even you could not find from that way, there are no way to recover your tracking number.

If the package you're expecting doesn't arrive, you could file a Missing Mail Search Request. To do that, you'll have to provide the sender's address, the recipient, the date the Mail was sent out, and the description of the Mail or package.

Alternatively, you may ask your seller to send tracking number to send you again or you can try to register for Informed Delivery that's only option can help you to recover incoming mails and package information. USPS Informed Delivery is a service that allows you to preview your Mail, manage deliveries and track your shipments digitally. **This service is free!**

#### Glimpse of Registering informed delivery account:

- Registration** : Sign up for **Informed Delivery's Free** section on the USPS website.
- Fill Address Details** : Enter your residential address to determine if it's eligible for Informed Delivery.
- Check Availability** : If Informed Delivery is available in your location, log in to your USPS account and click on Informed Delivery on the top right of your profile page.
- Apply Delivery box** : Enroll in the informed delivery box under "Account Management."
- Accept Terms** : Read the terms and conditions, click on the agree-on boxes and certify your address.
- Press "Select"** : Select "Enroll in Informed Delivery" to continue.
- Physical Verification** : You will then verify your identity either online or physically. If it's online, an OTP will be sent to your number, if it's physical, USPS will send an invite code to your residential address.

Once your Informed Delivery account is ready, you'll be able to check the delivery state of Mail and packages, including their expected day of arrival. **All your incoming Mail and package will be displayed** on the secured online dashboard. Also, the grayscale image of the address side of each letter-sized Mail will be uploaded for you to view. If you aren't available to receive the package on the expected day of arrival, you can leave delivery instructions. You could schedule redelivery via your informed delivery account if you missed a delivery. The service can also send text or email notifications about the delivery status of your packages.

#### Why USPS Tracking is not Updated?

The USPS tracking system provides you with detailed tracking for all your shipments. With every shipment, you will always receive a tracking number with which you can know the delivery status of your item at all times. Some of the information that the USPS tracking page includes are the delivery information, if available information, date and time of delivery, address of delivery. For more Go to this article, Here we list only the main reason listed.

There can be several reasons why a USPS tracking update may not be available

- Processing Delay** : The tracking information may not be updated until the package has been processed by the USPS facility. This can take a few hours or up to several days.
- Technical Issues** : The USPS tracking system may experience technical difficulties, causing delays in updating tracking information.
- Weather Conditions** : Severe weather conditions can cause disruptions in postal service and delay tracking updates.
- Incomplete or Incorrect Address** : If the address on the package is incorrect or incomplete, it may be delayed or returned to the sender, causing a delay in tracking updates.
- Package Scanning** : Not all USPS facilities scan packages at every stage of their journey, which can result in gaps in tracking information.

If you are concerned about a delay in your tracking information, you can contact USPS customer service for further assistance. They will be able to provide you with more information about the status of your package.

#### When to consider USPS package is delaying ?

The USPS will complete its daily deliveries by 5 pm, local time, Mondays to Saturdays. Your package may be delivered in the morning if it's ready after 5 pm, in your area. If your USPS package tracking data shows your package is in your destined place after 5 pm., it likely won't be delivered until the next morning.

Sometimes a USPS carrier may deliver something beyond 5 pm., but they do not guarantee that you will get your package in the evening. Delivery time varies from type of service with USPS. It may be possible that the package is still in transit and is not lost or delayed depending on what class of mail is being used and how long ago it was mailed. The following table outlines the delivery standards for various parcel and mail classes and indicates how long you should wait before you contact customer assistance with a concern.

MAIL TYPE	DELIVERY TIME	CONTACT CUSTOMER CARE AFTER
Priority Mail Express®	1-2 calendar days (guaranteed)	6 PM (local time) on the Guaranteed Delivery Date
Priority Mail®	1-2 to 3 business days (not guaranteed)	5 or more days from the date of mailing
First-Class Mail®	1-5 business days (not guaranteed)	5 or more days from the date of mailing
First-Class Package Service®	1-5 business days (not guaranteed)	5 or more days from the date of mailing
USPS Retail Ground®	2-5 business days* (not guaranteed)	5 or more days from the date of mailing
Parcel Select Ground®	2-5 business days* (not guaranteed)	5 or more days from the date of mailing
Parcel Select Lightweight®	2-8 business days* (not guaranteed)	14 or more days from the date of mailing
Package Services: Media Mail®, Bound Printed Matter, Library Mail	2-8 business days* (not guaranteed)	14 or more days from the date of mailing
Periodicals	3-8 business days* (not guaranteed)	14 or more days from the date of mailing
USPS Marketing Mail®	2-10 business days (not guaranteed)	14 or more days from the date of mailing

USPS Tracking Time for delaying

#### Check If You get fake USPS Tracking number

If you get tracking number somewhat fishy, that is fake tracking number. Don't open such tracking links or avoid / block such senders. Most of fake tracking number come have following kind of patterns :-

- Links to tracking numbers look fishy.** One good thing about text messages is that you can usually see the full link. Links that don't match "USPS.com" are part of a scam.
- Your tracking number doesn't show up in the USPS portal.** Every tracking number is unique and should match the one you received in a confirmation email. If it doesn't appear in a search, it's a bogus number.
- Your delivery date was earlier than when you placed an order.** USPS scams can involve real tracking numbers. The catch is that those tracking numbers are for orders that were already delivered. Double-check tracking numbers on the USPS site, and read delivery information carefully.
- You receive follow-up emails or texts asking for too much information.** Presumably, packages already have your address on them. If you missed a delivery or USPS has trouble delivering a package, they might ask you to choose a new delivery time. They will not ask for your address, credit card number, or other sensitive information.
- You're asked to pay for something extra.** USPS does not charge a fee for redeliveries. Any tracking number links that take you to a portal where you're asked for bank account or credit card information are fake.
- You bought heavily discounted items.** Scammers create fake e-commerce stores with disproportionately discounted items. If you don't get a receipt, or you receive an email address with a non-traceable tracking number, it's part of a scam.
- You never received your delivery.** If it's been over a month and you still haven't received your package, look up the tracking number on the USPS website. You've been scammed if the tracking number doesn't show up or isn't valid. Tracking links may also take you to suspicious sites — another indicator of a fake USPS tracking number.



If you believe you've been targeted by a phishing scheme, report the incident to USPS. And if you accidentally provided any information, file a report with the Federal Trade Commission (FTC) at [IdentityTheft.gov](http://IdentityTheft.gov).

### Type of USPS Status Meaning while Tracking

While Using tracking you will find the variety of status in every event and places where your package will be moved by USPS or their Channel partner. Let see what kind of status arrive when packages are in different stages of transit.

Status	Description
In Transit, Arriving Late	Arriving late means your usps package was schedule to particular date but due to some issue your package was rescheduled and would not delivery on the schedule given starting to order placed. What to do - Be calm, Ask for new date or automatically new date will be assigned to your package delayed by 1 or 2 days. This is happened at last phase of delivery where the package is about to deliver. For the Emergency, You can do to contact USPS helpline only if your package laying at USPS Regional Facility near you.
Arrived at USPS Facility	This can be also 'Arrived at USPS Regional Origin Facility'. Both these mean that your usps package came to usps sorting facility from which that parcel would be commeted for the usps facility or final local nearest usps facility for delivering you.
Departed USPS Regional Facility	This can be also 'Departed Post Office' and 'In Transit to Next Facility'. Both these mean that Your package will move to further hub near you. Your package will leave USPS Facility where it laying.
USPS in possession of Item	This status means that your package was created by some other third party agent, distribution channel partner or shipping company. This possession status show that your package was hand over by that other shipping company to USPS.
Arrived Shipping Partner Facility, USPS Awaiting Item	This means your package received at your shipping company other than USPS. This will later hand over to USPS for delivering by the status of Departed Shipping Partner Facility, USPS Awaiting Item.
Departed Shipping Partner Facility, USPS Awaiting Item	This status arise in picture when your package is handling by two or more transport or shipping company. Mean of this status is One shipping Company is moving your package from their own premises to USPS Regional facility.
Shipping Label Created, USPS Awaiting Item	Your item is ready to move by USPS but order of your shipment initialized by other shipping company which hand over your package to USPS between transit.
USPS Awaiting Item	Means your package with other shipping company that will handover your mail-piece to USPS in Future for delivering during transit.
Customs Clearance	This means your package is in process of Customs department in United States for duty checking like stuff. This status involve only in international shipping. Inbound into Customs is also included when your international package comes to United states. This will take time from 24 hours to a week based item and transporting country involve in transit. Package can be stuck in Customs When: The delay in Customs clearance occur when Missing or clerical issues in paperwork Unspecified or wrongly narated goods Restricted items Customs fees outstanding Problems in contacting the recipient Over valued shipment beyond the limit allowed.
Out for Delivery	This is the day of Package to be delivered to You. The delivery agent will call or arrive at your Premises.
Delivered	Package has been delivered to you or mail has been delivered to PO BOX.
USPS Awaiting Item	Means your package with other shipping company that will handover your mail-piece to USPS in Future for delivering during transit.
USPS Pre-Shipment	The stage of package in infant stage. Will a First event when your package will be handover to USPS for transit. This status will come after of the same to Label created.
Returned To Sender	When delivery address is not mentioned properly (insufficient address) or incorrect like door number or apartment number not mentioned or recipient not available or on long vacation, the package will be moved back to sender.

#### USPS Transit Status

### USPS Text Tracking

USPS Text Tracking ([usps.com/texttracking](https://usps.com/texttracking)) is a mechanism by which customers can be notified of the status of their package. Standard Message and Data Rates may apply. There are now several ways that customers can request Text Tracking:

#### USPS Text Tracking From your phone:

- Send a text to 28777 (2USPS) with your USPS tracking number as the content of the message.
- The text reply from USPS will be the latest tracking information for the item.
- Send a text to 28777 (2USPS) with your tracking number and a keyword.
- Keywords tell USPS the specific information you want to know, such whether or not delivery has been attempted.
- See more on keywords under the heading at How do I use keywords?

#### USPS Text Tracking From the web site:

After tracking a package on the USPS Tracking on this web site you may register to receive Text Tracking on a tracking number by tracking number basis. You may elect one of the following Text Tracking Options on the web site

- Expected Delivery Updates
- Day of Delivery Updates
- Package Delivered
- Available for Pickup
- Delivery Exception Updates
- All the options above

### USPS Price Calculator

Determining the cost of Packages domestically in United States, is now with Simple Way. Simply fill in the blanks, and let our online calculator figure out your postage with USPS Cost shipping calculator.

[Get USPS Rates](#)

### Calculate USPS Delivery Time

Determining transit time of Packages domestically in United States, is now with Simple Way. Simply put the origin & destination zipcode calculator figure out your postage delivery time with USPS delivery time calculator.

[Check Delivery Time](#)

### USPS Tracking Process & Methods

Here, you will get legit method to track your USPS Packages. Before, we go to understand the method, you may keep ready your tracking number if you have it to live check on the methods described here. We have described both methods which are authenticate and trustful.

The screenshot shows the USPS Tracking website. At the top, there's a navigation bar with 'USPS Tracking' and 'FAQs'. Below that, there's a section for 'Track Packages AnyTime, Anywhere' with a 'Learn More' button. The main part of the page features a search bar with the placeholder text 'ENTER TRACKING ID HERE' and a 'Track' button. A diagram with numbered steps (1-4) illustrates the tracking process: 1. REPLY YOUR TRACKING NUMBER, 2. OPEN USPS.COM, 3. ENTER TRACKING ID HERE, 4. TRACK. Below the search bar, there are three dropdown menus: 'What does my tracking number look like?', 'Where do I find my tracking number?', and 'How can I leave delivery instructions?'. The 'usps-track.us' logo is visible in the bottom right corner.

#### Method: 1: Package tracking from USPS.Com Website.

1. Ready your tracking ID -Ready your tracking ID mentioned on receipt, email received from USPS.Com. For more refer this link here. You can use our usps tracking tools also.
2. Open USPS.Com -Go to USPS.com to the authenticate USPS Web page to get most accurate information on this. You may use our tracking tools also provided on top of the page.
3. Enter USPS Tracking Number -Copy your tracking number mentioned on the documents and receipts. Paste or manually write that tracking number in the input box. If don't know about types you can refer tracking format here.
4. Press 'Track' -Press Track button besides the input box. After that you will get your tracking information mentioned.

#### Method: 2 USPS Tracking from USPS Android / ios Application.

1. Download USPS Mobile® App -Download USPS Mobile Android app from playstore. If you have iPhone then go to Apps store and search "USPS Mobile".
2. Press "Accept Terms" -Open Application after downloading USPS Mobile app and Press "Accept Terms".
3. Tracking Input Box -Now you will see input box with "Add a Tracking Number" text.

4. Enter tracking & Press Icon - Now Enter tracking Id in it and press on "search icon". Now you will get your tracking summary with the corresponding

### What is USPS Tracking ?

The USPS Tracking is a process of check the live status of Packages, parcels, shipments, consignment and Mails sent through United States Postal Services. Once you enter tracking number of an item(s) into the USPS Tracking our website input box above you can track the latest status of that parcel.

There are two parts of the tracking USPS. The primary parts call Status page and Secondary part is Tracking History. Let's discuss the both:

1. **USPS Package Status** - The basic summary of Status of packages. Say like "In transit", "Out for delivery", or may it "Delivered" etc. USPS updates its tracking information **within 24 to 48 hours**.
2. **Tracking History** - Entering the USPS Tracking number related with a mail piece into the track USPS page gives you the present status of a parcels alongside other timeline historical data. You can also go away directions for the carrier on where to depart your mailpiece if no one is reachable to receive it.

USPS Tracking packages gives start to finish thing and is accessible for most residential mail items that are huge enough and that are routed to local areas, including to restricted Army Post Offices (APOs), Fleet Post Offices (FPOs), Diplomatic Post Offices (DPO) goals and to ZIP Codes in U.S. domains and assets of Freely Associated States. You can find the items tracking history and see what form of offerings and points are associated with it. You can request emails and/or textual content messages about your object or a Proof of Delivery email.

### What does a USPS Tracking label look like?

Preprinted USPS Tracking labels have a peel-off portion at the bottom that can be retained for records and tracking.



- **USPS Tracking Retail Label** - USPS tracking number is the series of numbers under the barcode.
- **Label 400, USPS Tracking Label (Front Image above)** - For use by electronic option mailers; can be used at retail.

### Post office tracking and US Post are the same ?

Answer to this is Yes in United states, US Post office works as Post office in United States. Every country has their own Post office. Let's check when one person says post office in Canada, his meaning that Canada Post office. Same words in UK comes Royal Mail post office. Let check all Post office list world wide.

- **Canada Post office**- Canada Post Corporation, trading as Canada Post, is a Crown corporation that functions as the primary postal operator in Canada as Post office in Canada.
- **Aus Post** - Australia Post is wholly owned by the Australian Government represented by two Shareholder Ministers, the Minister for Finance and the Minister for Communications, Urban Infrastructure, Cities and the Arts in 1809
- **UK Post Office** -The Post Office is owned by the government of UK, and operates the 11,500 post offices around the UK. Royal Mail is owned by private shareholders, and runs the collection, sorting and delivery of post.
- **US Post office** - This US Post office is called as United States Postal Service (USPS). usps.gov operates this postal services in United States.
- **India Post** - It is fully functioned Indian Government owned company. It is working as Post Office Bank even. It is world's largest Post office after USPS.
- **Deutsche Post** - It is Germany based post office. German post office become private company in 2 January 1995.Deutsche Bundespost Postdienst becomes Deutsche Post AG; this is the company's privatization. The German government of Germany still owns a large share of the company, the state development bank KfW owns 50 percent.
- **La Poste** - It is post office of France. La Poste is a postal service company in France since 1891, operating in Metropolitan France, the five French overseas departments and regions and the overseas collectivity of Saint Pierre and Miquelon.

### How to find USPS tracking number?

Many people lost their usps tracking numbers. Here, we present a glimpse to retrieve forgotten tracking numbers of mails sent through USPS.Com & its affiliates stores and shopping sites.

#### Where do I search my tracking number ?

- **Mail receipt** - A physical mail receipt may help you, which was received while sending package through the Post Office. The shipping confirmation email you received from an online USPS retailer.
- **Insurance slip** - If your delivery cost less than 50 bucks, then you must have insurance of your parcel. This insurance slip has your package details with tracking numbers. You can capture forgotten tracking number from that too. Your business receipt, in the event that you acquired protection at a Post Office.
- **Confirmation email** - In the case first, if you made pick request through USPS then you have an email from USPS having tracking ID. Secondly, the apps or website where you purchased the items also send you an email updates which include tracking id after parcel picked up from suppliers and by webstore like usps.com, etsy.com, shopify & Amazon.
- **USPS helpline** - Call customer care of USPS.com at 1-800-275-8777 Give your register Id like, your order number, email address, or mobile number for reference and ask for sending forgotten tracking ids.
- **Our Dashboard** - A New technique in 2022. If you have tracking number for a while, you have to login our USPS-TrackUs site. After login you must track from confirmation email from us. After login, you may located to dashboard. Once you located, Enter your tracking id here. You will now get tracking history over their which will store your tracking number for 36 months.
- **USPS sales receipt** - Your USPS sales receipt if you bought something at the Post Office. Your USPS Post Office shipping receipts.
- **Label record** - Your online name or label record, on the off chance that you obtained protection on the web (through Click-N-Ship or eBay). The bottom peel-off portion of your USPS Tracking label.
- **Orange slip** - The back of the orange slip you received if you missed a USPS delivery.
- **From Article** - The article sent (beneath the standardized identification)

### Track Other than USPS Tracking ?

We are presently supporting many postal and private company trackings. You may enter any of tracking ids the following carrier and Post offices. But after entering tracking number. You have to "select" the company names mentioned below.

- **DHL Express** - You can track even DHL Packages in this USPS Widget.
- **Canada Post** - Although USPS, Canada Post office tracking is also supported here. Even we can track Xpresspost here.
- **UPS Tracking** - You may track UPS Packages with limited tracking information here.
- **FedEX** - Limited tracking information available with our tracking Widget.
- **DHL Other** - DHL eCommerce, DHL packets, DHL Parcel UK, Parcel Spain, Benelux and Global Forwarding tracking Supported. You may select "DHL" after entering reference ID.

### USPS Tracking Plus Vs USPS Tracking

USPS Plus tracking known as USPS Premium Tracking when launched is nothing but New option for Old USPS Tracking service that extends the length of time you can access the tracking history of a domestic package and Not free.

1. USPS evidence of delivery to resolve disputes and claims.
2. For Signature Packages only.
3. Package History Up to 10 Years.
4. Tracking information for signature items is available for 2 years.
5. USPS Tracking Plus provides options to extend access to the tracking history for anywhere from an additional 6 months up to 10 years for a small fee.
6. Critical evidence of mailing and or delivery / delivery attempt for legal and court proceedings.
7. Official authentic source of data that legal and financial sources may accept.

#### USPS Plus Tracking Prices [2022]

Retention Period	Scan Retention	Scan + Signature Retention
6 Months	\$0.99	-
1 Year	1.20	-
3 Years	1.50	3.75
5 Years	2.00	4.75
7 Years	3.00	5.75
10 Years	4.20	6.75

USPS Plus tracking - Prices

### How does USPS Tracking work?

USPS Tracking begins working when following hierarchy created with ordering parcels with usps post office.

1. **USPS Label Created** - The label of your identifiable shipment is filtered a few times all through the mailstream, regardless of whether we have it or one of usps transportation accomplices does.
2. **Label Scanning** - Tracking can begin when the package's sender or our delivery accomplice informs us electronically that we ought to anticipate a courier.

3. **Parcel Accepted For Transit** :- It proceeds with USPS accepting the parcel for travel and finishes when the courier is delivered to the beneficiary's specialist.
4. **Tracking online Update** - All through this procedure, you can get to this tracking data in an assortment of routes through the USPS Tracking number related with the thing.

### How to use USPS Tracking other than USPS.Com Tracking ?

There are multiple tracking option available for tracking parcels, packages and shippings from united states postal service (USPS) There many websites and applications that's able to services tracking services when usps.com's tracking services are down (Tracking down) or take a long to respond / Web page down. Our Tracking tools at USPS-Track.us is able to track all consignment from USPS USA, USPS canada, Uk and All american regions. Our tracking features covers all tracking service of USPS Tracking USA to USPS Tracking World wide. Our Tracking Features:-

1. **When USPS Tracking Down use USPS Text Tracking** :- You can use usps text tracking or call usps help center phone mentioned below sections.
2. **Track USPS with Niche websites shippers** :- Many usps affiliation websites like usps-track.us, after ship, easyship and tracking.com are providing official tracking after usps.com official tracking. These are reliable source of USPS parcel tracking who can be trusted.

### How do I access USPS tracking information?

The kind of tracking and shipping information accessible is based on the classification of mail or add-on services you purchased at the time of mailing. Whether you are the sender or recipient, You can freely track your package status by the following options :-

1. **By USPS-Track,Us Web Tools**: Use www.USPS-Track.us Tracking tools to track package so safe and fast from United States Postal Services. We are authorised and taken prior approval from usps.com to show status under fair use of license.
2. **By USPS.Com Online**: Use USPS Tracking® on the United States Postal Service® website. Visit : m.usps.com
3. **By USPS Text Tracking** Send a text to 28777 (2USPS) with your tracking number as the content material of the message. Standard message and facts charges can also apply.
4. **By Smart phone USPS Apps**: Download the USPS Mobile® app for iPhone® and Android™, Google Play banner -- "Android App on Google Play"
5. **By USPS phone Calling**: To gain tracking information, clients can go to Contact USPS for the telephone wide variety and hours of operation at Toll free phone number 1-800-ASK-USPS™(1-800-275-8777). For telecommunications machines for the Deaf/Hailetypewriter (TDD/TTY), name 1-800-877-8338. Listen to computerized statistics 24 hours/seven days per week.

### What is Cost of USPS Tracking?

Wonder? Yes, to track USPS is not free anyway. When you select the services from USPS.Com, there some sort of tracking prices which are included in your cost of delivery charges. Let's take a brief idea of Cost of USPS Tracking here in this tabular data :-

Individual Package	Price (2022)
USPS Marketing Mail (postcards only)	\$0.25
First-Class Package Service—Retail	Included
First-Class Package Service—Commercial	Included
Package Services (Library Mail, Media Mail, Bound Printed Matter)	Included
Parcel Select	Included
Priority Mail	Included
USPS Returns (First-Class Package Service—Commercial and Priority Mail with integrated retail system label, and Parcel Select Ground)	Included
USPS Retail Ground	Included

Price of USPS Tracking

### How long USPS kept records for tracking?

The records of USPS mail classes and services, counting get to be bundle history and Confirmation of Conveyance when accessible, are put away within the framework for the life of the bundle information:

Mail Class and Services	Record Storage
USPS Tracking® Service	120 days
Signature Confirmation Service	1 year
Priority Mail Express Service	2 Years
Certified Mail™ Service	2 Years
Registered Mail Service	2 Years
Numbered International Mail Services	2 Years
Adult Signature Required/Adult Signature Restricted Delivery Mail Services	2 Years
USPS Premium Tracking ( Plus Tracking now )	10 years

Time frame of Tracking Records

### Common Tracking issues arriving with USPS

Many users get delay and postal issue with USPS.Com. Some general problem by users reported us are mentioned in following list.

- **Michel Says**— I have had tracking just deleted recently too. I have something that shipped from Illinois July 30th and today updated in York PA when its destination is SC.
- **Oasis Saying** — They legit erased 35 days worth of tracking on a package I've been waiting on. If you looked at it today, you would just think the package started in New York yesterday. Thankfully I have screenshots and text updates from the seven different states it's been to.
- **Little Ange said** -My "lost" package mysteriously arrived not long after that.
- **Sara twits** — my Amazon package is lost and my Etsy package is lost too. usps needs step it up bro.
- **Callin twits** — I ordered something to be delivered via @USPS in the beginning of April of this year. It did not show up by the estimated date, so I gave it a couple of weeks just in case. It still didn't show up, so I filed a lost package claim with USPS on May 2nd. 1/4.
- **Chuck Taggart** -Dear @USPS: So when my package, which was delivered days ago, is still shown as "in transit, arriving late, delivery date unknown" it is truly lost at this point, isn't it?

### We offers Free Online USPS International Tracking

The United States Postal Service is reminding clients that — for no extra charge — Web based status tracking has been added to certain International shipments Tracking for lightweight Parcels and Shipments to choose nations.

USPS® worldwide mail tracking go to Canada, Mexico, and in excess of 190 nations. Pick a mailing administration dependent on conveyance speed and delivery rates. Our quickest administrations even incorporate global tracking and protection. Snap N-Ship® and USPS online apparatuses assist you with rounding out traditions structures and print postage and address names. The free internet Tracking mail services is accessible for these things sent to Canada, Australia, New Zealand, Belgium, Great Britain, Germany, France, Netherlands, Croatia, Denmark, Spain, Switzerland, Israel and Brazil.

USPS	Details
Tracking Id	9202390989854543475846506
Carrier Name	Usp
Status	Delivered By Agent To Merchant
Status Brief	Delivered By Agent To Merchant
Last Update Time	12:00 Pm
Last Update Date	October 24, 2022
Status Location	Frazeysburg Oh, 43822

DELIVERED BY AGENT TO MERCHANT

- 10/24/22 12:00 PM ● **Delivered by Agent to Merchant**  
FRZ, OH 43822
- 10/22/22 7:48 AM ● **Departed Agent Facility**  
FRZ, OH 43822
- 10/18/22 12:00 PM ● **Arrived Agent Facility**  
FRZ, OH 43822

USPS International Tracking tools for which free web based Tracking is accessible include:

- USPS First Class Package International Service
- USPS Priority Mail International Flat Rate Envelopes
- USPS Priority Mail International Small Flat Rate Boxes

USPS International Shipping Service Features:

- First-Class Package International Service is USPS' most affordable international service for small packages. Customers may send items weighing up to 4 pounds with a maximum value not exceeding \$400. Delivery time varies by destination.
- Priority Mail International Flat Rate Envelopes, and Priority Mail International Small Flat Rate Boxes also let customers send items up to 4 pounds, with the added convenience of low Flat Rate pricing and free shipping supplies. Delivery in 6 – 10 business days for many major markets (average number of days may vary based upon origin and destination).

How to check USPS International delivery status ?

Senders can track delivery status by going to [usps.com](https://tools.usps.com/go/TrackConfirmAction?inputAction) and clicking on Track & Confirm or <https://tools.usps.com/go/TrackConfirmAction?inputAction> and use the shipments barcode tracking number. Receivers wishing to access free web based tracking with First-Class Package International Service, Priority Mail International Flat Rate Envelopes, and Priority Mail International Small Flat Rate Boxes must use an online, or electronically generated shipping label through one of the following methods:

- USPS-approved PC Postage Providers (Endicia.com, Stamps.com)
- usps.com (Click-N-SHIP, Click-N-SHIP for Business, Webtools apps)
- USPS Global Shipping Software (GSS) or other USPS-approved software providers

**What are the USPS International Shipping Prices ?**

USPS Services	Price (2022)
Global Express Guaranteed (at the Post Office)	\$87.80
Global Express Guaranteed(Commercial Base)	\$64.41
Global Express Guaranteed(Commercial Plus)	\$64.41
Priority Mail Express International(Air PO)	\$47.95
Priority Mail Express International(Commercial Base)	\$44.85
Priority Mail Express International(Commercial Plus)	\$44.85
Priority Mail Express International Flat Rate(PO)	\$47.95
Priority Mail International (Air PO)	\$40.45
Priority Mail International (Commercial Base)	\$37.47
Priority Mail International (Commercial Plus)	\$37.47
First-Class Letters and postcards	\$1.40
First-Class Large Envelopes (Flats)	\$2.75
First-Class Package	\$14.85
Airmail M-Bags	\$52.60

USPS International Shipping Prices

**Contact USPS Customer Care Service**

Want an Urgent help on package lost or delay in delivery? Locate the most ideal approach to find support and assistance with USPS®. Round out a short shape or get tips to fix the absolute most basic issues directly from USPS Customer Care toll Free Number.

**Contact USPS**

Connect with USPS customer service representatives to help resolve your issue and get back on track.

Phone: 1-800-ASK-USPS® (1-800-275-8777)

USPS General Inquiry about your Package Status. Call Above Tollfree number for your Present Status Quo of Your USPS Post or Shipment Details.

**Email @ USPS Customer Service**

Enter Tracking Details to This page For Contacting usps by email about your Package

**Working Hours:**

Monday – Friday 8 AM – 8:30 PM ET  
 Saturday 8 AM – 6 PM ET

**Popular Trackers**

- [How to Ship to Europe - First Class Small Flat Rate](#)
- [How to Ship to Europe - Priority Mail International](#)
- [How to Ship to Europe - Priority Mail Flat Rate Boxes & Envelopes](#)
- [How to Ship to Europe - USPS First Class](#)
- [How to Ship to Europe - USPS Priority Mail](#)

**Services**

- [USPS By Appointment](#)
- [USPS Shipping Calculator](#)
- [USPS Delivery Time](#)
- [USPS Cost Saver](#)

**Local Tools**

- [Postnet ZIP+4®](#)
- [USPS Form 38](#)
- [USPS Form 3849](#)
- [Priority Mail Flat Rate](#)
- [International Flat Rate](#)
- [Address Change](#)

**Terms Contact**

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## Exhibit 4 – Attachment 3

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**4.4 - Form E: Owner Verification**

See below for the following owner verifications:

- Thomas Moore
- Winston Ceasear
- Larry Wireman
- Judy Wireman

**FORM E: BACKGROUND CHECK INDIVIDUAL VERIFICATION**

*Each individual identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) (i.e., each owner, shareholder, director, board member, and individual with an economic interest in the Applicant) must complete a separate form.*

Alabama Medical Grow  
Business License Applicant Name

Integrated  
License Type

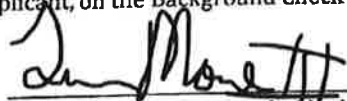
TOM MOORE  
Individual's Name

Individual's Role (select all that apply):  Owner  Shareholder  Director  Board Member  
 Individual with Economic Interest in Applicant

**Verification**

The undersigned, as identified above, hereby verifies all of the following:

- That the individual's role(s) in the Applicant's business is one or more of the roles identified by § 20-2A-55(b), Code of Alabama 1975 (as amended).
- That the individual shall, as required by § 20-2A-55(b), Code of Alabama 1975 (as amended), submit to a state and national criminal background check, to be conducted and/or coordinated by the Alabama Law Enforcement Agency.
- That the individual has submitted its completed state criminal background check application form (ALEA SBI Form 46), and all other items required therewith, to ALEA
- That the individual has submitted its national criminal background check form (FBI Identity History Summary Request Form), and all other items required therewith, to the FBI.
- That the individual, on his/her state and national background check forms, has authorized ALEA and the FBI, as applicable, to release any and all criminal history information of the individual to the Alabama Medical Cannabis Commission.
- That the individual will promptly respond to any request from ALEA, the FBI, and/or the Alabama Medical Cannabis Commission regarding the processing of the individual's state and national criminal background checks.
- That the individual has confirmed that his/her name and role(s) have been included, by the Applicant, on the Background Check Applicant Verification Form.

  
Signature of Verifying Individual

12/29/22  
Verification Date

**FORM E: BACKGROUND CHECK INDIVIDUAL VERIFICATION**

*Each individual identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) (i.e., each owner, shareholder, director, board member, and individual with an economic interest in the Applicant) must complete a separate form.*

Winston Ceasear  
Business License Applicant Name

\_\_\_\_\_  
License Type

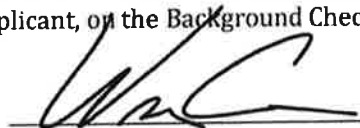
Winston Ceasear  
Individual's Name

Individual's Role (select all that apply):  Owner  Shareholder  Director  Board Member  
 Individual with Economic Interest in Applicant

**Verification**

The undersigned, as identified above, hereby verifies all of the following:

- That the individual's role(s) in the Applicant's business is one or more of the roles identified by § 20-2A-55(b), Code of Alabama 1975 (as amended).
- That the individual shall, as required by § 20-2A-55(b), Code of Alabama 1975 (as amended), submit to a state and national criminal background check, to be conducted and/or coordinated by the Alabama Law Enforcement Agency.
- That the individual has submitted its completed state criminal background check application form (ALEA SBI Form 46), and all other items required therewith, to ALEA
- That the individual has submitted its national criminal background check form (FBI Identity History Summary Request Form), and all other items required therewith, to the FBI.
- That the individual, on his/her state and national background check forms, has authorized ALEA and the FBI, as applicable, to release any and all criminal history information of the individual to the Alabama Medical Cannabis Commission.
- That the individual will promptly respond to any request from ALEA, the FBI, and/or the Alabama Medical Cannabis Commission regarding the processing of the individual's state and national criminal background checks.
- That the individual has confirmed that his/her name and role(s) have been included, by the Applicant, on the Background Check Applicant Verification Form.

  
\_\_\_\_\_  
Signature of Verifying Individual

12-15-2022  
Verification Date



**FORM E: BACKGROUND CHECK INDIVIDUAL VERIFICATION**

*Each individual identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) (i.e., each owner, shareholder, director, board member, and individual with an economic interest in the Applicant) must complete a separate form.*

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated Facility  
License Type

Judy Wireman  
Individual's Name

Individual's Role (select all that apply):  Owner  Shareholder  Director  Board Member  
 Individual with Economic Interest in Applicant

**Verification**

The undersigned, as identified above, hereby verifies all of the following:

- That the individual's role(s) in the Applicant's business is one or more of the roles identified by § 20-2A-55(b), Code of Alabama 1975 (as amended).
- That the individual shall, as required by § 20-2A-55(b), Code of Alabama 1975 (as amended), submit to a state and national criminal background check, to be conducted and/or coordinated by the Alabama Law Enforcement Agency.
- That the individual has submitted its completed state criminal background check application form (ALEA SBI Form 46), and all other items required therewith, to ALEA
- That the individual has submitted its national criminal background check form (FBI Identity History Summary Request Form), and all other items required therewith, to the FBI.
- That the individual, on his/her state and national background check forms, has authorized ALEA and the FBI, as applicable, to release any and all criminal history information of the individual to the Alabama Medical Cannabis Commission.
- That the individual will promptly respond to any request from ALEA, the FBI, and/or the Alabama Medical Cannabis Commission regarding the processing of the individual's state and national criminal background checks.
- That the individual has confirmed that his/her name and role(s) have been included, by the Applicant, on the Background Check Applicant Verification Form.

Judy R. Wireman  
Signature of Verifying Individual

12-28-22  
Verification Date

**FORM E: BACKGROUND CHECK INDIVIDUAL VERIFICATION**

*Each individual identified by § 20-2A-55(b), Code of Alabama 1975 (as amended) (i.e., each owner, shareholder, director, board member, and individual with an economic interest in the Applicant) must complete a separate form.*

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated Facility  
License Type

Larry Wireman  
Individual's Name

Individual's Role (select all that apply)  Owner  Shareholder  Director  Board Member  
 Individual with Economic Interest in Applicant

**Verification**

The undersigned, as identified above, hereby verifies all of the following:

- That the individual's role(s) in the Applicant's business is one or more of the roles identified by § 20-2A-55(b), Code of Alabama 1975 (as amended).
- That the individual shall, as required by § 20-2A-55(b), Code of Alabama 1975 (as amended), submit to a state and national criminal background check, to be conducted and/or coordinated by the Alabama Law Enforcement Agency.
- That the individual has submitted its completed state criminal background check application form (ALEA SBI Form 46), and all other items required therewith, to ALEA
- That the individual has submitted its national criminal background check form (FBI Identity History Summary Request Form), and all other items required therewith, to the FBI.
- That the individual, on his/her state and national background check forms, has authorized ALEA and the FBI, as applicable, to release any and all criminal history information of the individual to the Alabama Medical Cannabis Commission.
- That the individual will promptly respond to any request from ALEA, the FBI, and/or the Alabama Medical Cannabis Commission regarding the processing of the individual's state and national criminal background checks.
- That the individual has confirmed that his/her name and role(s) have been included, by the Applicant, on the Background Check Applicant Verification Form.

Larry Wireman  
Signature of Verifying Individual

12-28-22  
Verification Date

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 5 – Performance Bond

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

attorney

Title of Verifying Individual

Julie B. Mitchell

Signature of Verifying Individual

3/3/23

Verification Date

License Type: INTEGRATED FACILITY

Please see below for required Form M, as well as additional attachments from applicant and surety company showing intent to provide surety upon commencement of project.

FOIA (b)(6)

FOIA (b)(6)

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 6 – Minimum Liquid Assets Requirement

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

Attorney

Title of Verifying Individual



Signature of Verifying Individual

12.30.2022

Verification Date

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 6 – Minimum Liquid Assets Requirement

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

Attorney

Title of Verifying Individual



Signature of Verifying Individual

12.30.2022

Verification Date



See Attachments for both Larry and Judy Wireman's proof of at least \$250,000.00 in liquid assets.

# Exhibit 6 – Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)



# Exhibit 6 – Attachment 2

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)



## Exhibit 6 – Attachment 3

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

FOIA (b)(6)

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 7 – Demonstration of Sufficient Capital

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**See Attachments 1-2 for Sufficient Capital.**

# Exhibit 7 – Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)



FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

# Exhibit 7 – Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)



FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

# Exhibit 7 – Attachment 3

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

Please see Attachment 3 to Exhibit 7 below for independent CPA verification of the Wiremans' funds.

FOIA (b)(6)

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 8 - Minimum Operating Capital

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**See Attachments 1-2 for proof of financial ability for Applicant to maintain operations for not less than 2 years following license.**



## Exhibit 8 – Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

# Exhibit 8 - Attachment 2

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



FOIA (b)(6)

FOIA (b)(6)

FOIA (b) (6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

FOIA (b)(6)

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 9 – Financial Statements

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell      12.30.2022  
Signature of Verifying Individual      Verification Date



Financial Statement projections for a new industry within any market can have a large element of uncertainty. In particular, estimates for patient participation, speed with which a program can be effectively initiated, determination of pricing sensitivity from potential patients, and acceptability of medical cannabis products by the market's population all play major roles in financial projections. Applicant has taken a conservative approach to financial projections. This will allow Applicant to comfortably grow with the market.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

Although the competitive environment statewide is set, the final location of competing dispensaries is not known. The location of potential competitors will have an undeterminable impact on the projections as well. These projections assume a rather direct relationship between dispensary count in a particular metro area and population (a

statistically equal distribution based on population). Dramatic variance from this assumption may have positive or negative repercussions for a potential operator.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

9.1 – Balance sheet report, providing a snapshot of the value of assets, liabilities and equity at commencement, or for projections, as of December 31 of each year.

AL ST 8-27-1 et. seq.

9.2 – Profit and loss report, summarizing any income, expenses and net profit from the applicant's inception to date of commencement and as projected over each calendar year thereafter, including the year of commencement.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

9.3 – Statement of cash flow, examining the cash flowing into and out of the Applicant’s business from inception to commencement and during each calendar year thereafter, including the year of commencement.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 10 - Tax Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

Applicant will adhere to all require to all tax regulations for both the State of Alabama and Federal Law.

Pursuant to AL Ch 2A of Title 20 (20-2A-80), Applicant will:

*Sales Tax collection* – At the point of sale, the qualifying patient’s receipt will include the required 9% charge for sales tax. The portion of the transaction for the tax will be deposited through the ordinary course of business. All sales tax collections will be remitted monthly to the State of Alabama as required on the appropriate monthly returns.

*Tax Filings* – Each individual owner will be responsible in preparing or having prepared, all individual state and federal quarterly and annual tax filings. This includes the annual privilege tax stipulated under 20-2A-80. The owner or his tax preparer will calculate net worth for the privilege tax determination using Section 40-14A-23 of the Alabama tax code.

*Payroll Services* – Applicant will utilize a payroll service to process payroll for Applicant employees. This will insure state and federal payroll taxes and other required withholdings, including state and federal income taxes, FICA, State and Federal unemployment, 401K withholdings, health insurance premiums, etc., are remitted in a timely and accurate manner, as well as cost-effectively processing our employee payroll.

*CPA Services* – Applicant will contract with a CPA firm to review procedures to ensure the accurate recognition, collection, and remittance of taxes associated with the Alabama medical cannabis industry, as mandated by CH 2A of Title 20. The firm will also prepare all State and Federal Corporate tax returns as required quarterly or annually. If needed, this CPA firm will be available to assist in the preparation of the annual Alabama Privilege tax, as covered in Section 20-2A-80 (each individual owner may elect to utilize their own respective tax preparer or prepare personally).

*Deductions* – Federal law disallows expense deductions for cannabis businesses (specifically, schedule I or II substances of the Controlled Substances Act) pursuant to US Code 280E. Based on court rulings however, “return of capital” is not considered income and is therefore non-taxable. Effectively, costs of goods sold are non-taxable for Federal Income tax purposes. Applicant will account for all expenses directly associated with product

development as cost of goods sold. We will differentiate utility cost, labor costs, material costs, equipment costs, and all other operating costs between those *directly* relating to the production of cannabis products and those that are administrative, general building maintenance, office supply, transportation, and other non-product costs. Applicant will work closely with our external CPA to develop cost systems that can accurately track direct product costs in order to legally minimize our Federal Income Tax burden.



All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 11 – Business Formation Documents

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**See Attachment 1 for certified copies of formation documents from Alabama Secretary of State for Applicant.**

# Exhibit 11 - Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2012  
Verification Date

John H. Merrill  
Secretary of State

P. O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that**

as appears on file and of record in this office, the pages hereto attached, contain a true, accurate, and literal copy of the Articles of Formation filed on behalf of Alabama Medical Grow, LLC, as received and filed in the Office of the Secretary of State on 10/10/2022.



20221219000019206

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

12/19/2022

Date

A handwritten signature in black ink that reads 'John H. Merrill'.

John H. Merrill

Secretary of State

**DOMESTIC LIMITED LIABILITY COMPANY (LLC)  
CERTIFICATE OF FORMATION**

**PURPOSE:** In order to form a Limited Liability Company (LLC) under Section 10A-5A-2.01 of the Code of Alabama 1975, this Certificate of Formation and the appropriate filing fees must be filed with the Office of the Secretary of State. **The information required in this form is required by Title 10A.**

- 1. The name of the limited liability company (must contain the words "Limited Liability Company" or the abbreviation "L.L.C." or "LLC," and comply with Code of Alabama, Section 10A-1-5.06. You may use Professional or Series before Limited Liability Company or LLC (or PLLC or SLLC) if they apply:

Alabama Medical Grow, LLC

- 2. A copy of the Name Reservation Certificate from the Office of the Secretary of State must be attached.

- 3. The name of the registered agent (only one agent): John Price

Street (no PO Boxes) address of registered office (must be located in Alabama):

Suite B-100, 28103 Perdido Beach Blvd. Orange Beach, AL 36561

\*COUNTY of above address: BALDWIN

Mailing address in Alabama of registered office (if different from street address):

P.O. Box 189 Orange Beach, AL 36561 BALDWIN

- 4. The undersigned certify that there is at least one member of the limited liability company.

**(For SOS Office Use Only)**

Alabama	
Sec. Of State	
001-043-859	DLL
Date	10/10/2022
Time	16:21:00
File	\$100.00
County	\$100.00
Total	\$200.00

**DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION**

5. Check **only** if the type applies to the Limited Liability Company being formed:

- Series LLC complying with Title 10A, Chapter 5A, Article 11
- Professional LLC complying with Title 10A, Chapter 5A, Article 8
- Non-Profit LLC complying with Section 10A-5A-1.04(c)

6. The filing of the limited liability company is effective immediately on the date received by the office of the Secretary of State, Business Services Division or at the delayed filing date (cannot be prior to the filing date) specified in this filing complying with Section 10A-1-4.12

The undersigned specify 10 / 10 / 2022 as the effective date (must be on or after the date filed in the office of the Secretary of State, but no later than the 90th day after the date this instrument was signed) and the time of filing to be 4 : 20  AM or  PM. (cannot be noon or midnight – 12:00)

Attached are any other matters the members determine to include herein (if this item is checked there must be attachments with the filing).

10 / 10 / 2022  
Date (MM/DD/YYYY)

John Price  
Signature as required by 10A-5A-2.04

Organizer  
Typed title (organizer or attorney-in-fact)

\*County of Registered Agent is requested in order to determine distribution of County filing fees.

**Additional Details**

**Organizers**

**Organizer**

**Street Address**

**Mailing Address**

Price John

28103 Perdido Beach Blvd Unit  
B-100  
Orange Beach, AL 36561

P.O. Box 189  
Orange Beach, AL 36561

John H. Merrill  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that**

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

**Alabama Medical Grow, LLC**

This name reservation is for the exclusive use of John Price, P.O. Box 189, Orange Beach, AL 36561 for a period of one year beginning October 10, 2022 and expiring October 10, 2023



RES050661

**In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.**

October 10, 2022

**Date**

**John H. Merrill**

**Secretary of State**



All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 12 – Business License and Local Authorization

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**12.1 Business License**

Not Started, but completion expected 30-60 days *after* award of license, if applicable.

**12.2 Resolution or ordinances approving applicant's business present in jurisdiction**

See Attachment 1 for Foley zoning ordinance and order authorizing medical cannabis in Foley, AL.

See Attachment 2 for community support letter.

## Exhibit 12 - Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

License Type: Integrated Facility

See Below for Foley zoning ordinance and order authorizing medical cannabis in Foley, AL.

This Instrument Prepared By:

**City of Foley, AL**



**Signature Copy**

**Ordinance: 22-2039 ORD**

407 E. Laurel Avenue  
Foley, AL 36535

**File Number: 22-0515**

**Enactment Number: 22-2039 ORD**

**AN ORDINANCE AUTHORIZING THE OPERATION OF MEDICAL CANNABIS  
DISPENSING SITES WITHIN THE CITY OF FOLEY**

WHEREAS, in the 2021 legislative session the Alabama Legislature passed Act. No. 21-450 (the "Act"), legalizing and creating a regulatory framework for medical cannabis; and

WHEREAS, the Alabama Legislature made a number of findings of fact, including:

"Medical research indicates that the administration of medical cannabis can successfully treat various medical conditions and alleviate the symptoms of various medical conditions."

"There are residents in Alabama suffering from a number of medical conditions whose symptoms could be alleviated by the administration of medical cannabis products if used in a controlled setting under supervision of a physician licensed in this state."

"Establishing a program providing for the administration of cannabis derivatives for medical use in this state will not only benefit patients by providing relief to pain and other debilitating symptoms, but also provide opportunities for patients with these debilitating conditions to function and have a better quality of life and provide employment and business opportunities for farmers and other residents of this state and revenue to state and local governments;" and

WHEREAS, the Act provides for the medical use of medical grade products that contain a derivative of cannabis by a registered qualified patient; and

WHEREAS, this Act requires that the governing body of a municipality must first adopt an ordinance to authorize the operation of dispensing sites within the corporate limits of the municipality before any such business can operate in the municipality; and

WHEREAS, the Act has become law and codified as Code of Alabama, §§ 20-2A-1, et seq.; and

WHEREAS, the City of Foley wishes to authorize the operation of medical cannabis dispensing sites within the corporate limits of the City of Foley subject to zoning, business license, and other revenue and police power requirements.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF FOLEY, ALABAMA that, in accordance with Alabama Code, Section 20-2A-51, a holder of a license granted by the State of Alabama pursuant to Act 21-450 is hereby authorized to operate a medical cannabis dispensing site within the corporate limits of the City of Foley, subject to the provisions of Act 21-450 and state law, and further subject to any relevant provisions of the Code of the City of Foley, including applicable zoning restrictions, business license requirements, and similar matters.

PASSED, APPROVED AND ADOPTED this 19th day of September 2022.



President's Signature J.W. Trammil

Date 9-19-22

Attest by Clerk Kathryn Taylor

Date 9-19-22

Mayor's Signature [Signature]

Date 9/19/22

## Exhibit 12 - Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

See below for letter of community support from local doctor.



Honorable Chairman and Members of the Alabama Cannabis Board:

I am writing in strong support of Thomas Moore and Winston Ceasear's involvement in the Alabama medical marijuana program.

They are proven innovators in medical marijuana engineering, architecture, construction, growth, and propagation. They have a proven track record in Mississippi. As a long-term frontline combatant in the ongoing opioid crisis, I have been involved in the Virginia cannabis industry for many years. My goal has been to increase access and awareness of the benefits of cannabis in combating the abuse of opioids. In that role I heard of the advances being made by Mr. Moore and Mr. Ceasear in Mississippi. I made up my mind to travel to Prentiss, Mississippi to see if what I have been hearing across the industry was factual and how we might utilize such a model in Virginia. I was amazed at the accomplishments they had made all without being encumbered with debt. In my estimation, debt is the Achilles' heel of a viable medical marijuana program for states considering allowing the industry. Unrealistic debt service automatically increases costs of product and thereby economic barriers to access. It also facilitates growth of the unregulated and cheaper illicit market.

Not only is their limited-to-no-debt model innovative, and revolutionary for the industry their corporate structure of true diversity is refreshing. I am an Alabama born, bred, and educated, black man raised in Alabama, Mississippi, and Tennessee. When I arrived in Prentiss, Mississippi and met cofounder, Winston Ceasear, I was surprised and ecstatic to meet a man of color like myself.

Mr. Winston is a brilliant black entrepreneur and innovator in his own right who together with Mr. Tom Moore has built MGO from the ground up without the encumbrances of needless debt. His knowledge of the industry and the medical potential of the products is unmatched.

As a medical professional, with a strong biology and chemistry background, I was most impressed by their investment in research out of the gate. From the outset, their focus was on assembling a lab and research staff devoted to science and innovation in the medical marijuana industry. It was refreshing to see a company, putting their money where their mouth was versus focusing their efforts on the potential for an adult use industry. After

evaluating their operation with its dedication to science, research over profits, and inclusion of all groups, I decided to accept an offer to join their team and add a real time medical perspective to their program. My goal is to enhance research and patient/physician education to ensure the development of solid standards of care. Such standards of care are essential for the development of a safe and effective medical marijuana program. Our plan is to work with in-state colleges and universities. As a PROUD graduate of an Alabama HBCU, Oakwood University, I hope to promote cooperation and possibly collaboration between our major universities and smaller ones, in-state institutions such that all students benefit from the opportunities that a well-managed medical marijuana program should bring.

Mr. Moore and Mr. Ceasear have not limited their activities to corporate development. They have also developed ingenious applications to assist law-enforcement and state regulators to track product from seed, to sale, to law-enforcement interdiction. To date there are our existing programs, but none as innovative as what MGO has developed. If instituted this will limit in-roads of the illicit market, wherever enacted.

Finally, not only are they diversity minded. They are also excellent stewards of the environment and their community. This is very important to me as I maintain my family home place in Huntsville, and I have families and dear friends throughout the state. Their model in Mississippi focuses on growth and development of economically disadvantaged communities versus the typical medical marijuana model which focuses on large urban areas and immediate profits.

Again, I recommend Mr. Thomas Moore and Mr. Winston Ceasear without reservation. I do not take this recommendation for my home state of Alabama lightly.

Sincerely,

Dr. Murray E Joiner, Jr, MD.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 13 – Business Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

### **13.1 Business structure and plan for adherence to corporate conventions**

Applicant will be owned by two entities: J&L and MC Holdings, LLC. J&L will own 51% and MC Holdings, LLC will own 49%. J&L consists of Judy Wireman (50%) and Larry Wireman (50%), and MC Holdings, LLC consists of Tom Moore (75%), and Winston Ceasear (25%).

As an Alabama-registered Limited Liability Company, Applicant will abide by all AL laws and regulations pertaining to Limited Liability Companies, in particular: AL ST § 10A-5A-1 et. seq., also known as Alabama Limited Liability Company Law.

### **13.2 Business goals, including 3 year and 5 year plan**

Applicant has established the following goals:

#### *Year One:*

- Applicant will receive necessary permits and licenses to begin operations as an integrated facility;
- Applicant will complete buildout and equipment acquisition for the Cultivation and Processing Center, Disposal Facility, and Transportation Center;
- Applicant will complete buildout, employee staffing, employee training, and initial stocking for targeted dispensaries;
- Applicant will ensure highest quality standards to assure effectiveness and safety of products; and
- Applicant will continuously review and refine any procedures to reach optimal operational efficiencies.

#### *Year Three:*

- Applicant will be operating at maximum grow/production capacity.
- Market share of higher than fair share in each market located. *\*Fair share to be estimated based on national averages of patient counts per population as found in MJBiz annual factbooks.\**
- Applicant will perform regular guest surveys and maintain higher than a 95% favorable rating as to customer interaction and product satisfaction.

*Year Five:*

- Applicant achieves a market share of 20% higher than fair share in each market located. *\*Fair share to be estimated based on national averages of patient counts per population as found in MJBiz annual factbooks.\**
- Applicant will perform regular guest surveys and maintain higher than a 95% favorable rating as to customer interaction and product satisfaction.

**13.3 Organization Chart**

See Attachment 1 for Applicant's organizational chart.

**13.4 Job descriptions of all managerial positions showing clear delineation of authority qualifications and duties**

*Director Of Operations* - The Director of Operations will drive Applicant's long-term strategic planning process by overseeing and managing all aspects of production, transportation, disposal, and dispensary operations. The position will be responsible for ensuring staff training is maintained regarding safety, quality control, regulation adherence, and general staff expectations. This includes, but is not limited to:

1. Cultivation;
2. Extractions;
3. Cloning;
4. Product production and quality control; and
5. Inventory control.

*Director of Dispensary Operations* - The Director of Dispensary Operations will direct and supervise all Dispensary Managers. The position will review product business volume data and customer feedback to ensure the dispensaries are operating efficiently and maintaining a high standard regarding guest satisfaction and customer needs. This position will ensure that the dispensaries are operated in the most efficient manner while maintaining the highest standards as to product safety and security. The position will work with the Director of Operations to coordinate product production based on the latest market demands. This position reports directly to the Director of Operations.

*Director Of Extractions/Products* - Director of Extractions will oversee all aspects of the extraction process. This position reports directly to the Director of Operations.

Responsibilities include, but is not limited to:

1. Quality control;
2. Safe working conditions;
3. Maintaining a clean work environment; and
4. Ensuring all processes and products follow relevant regulation guidelines.

This position will oversee all aspects of product production. This will include, but not be limited to:

1. Creation of edible recipes;
2. Processes of edible production;
3. Preparation of products, maintaining a safe work environment; and
4. Adhering to all regulations set forth by the Alabama Health Department.

*Cultivation Manager* -The Cultivation Manager will oversee the growth of the plant from clone to harvest. The Cultivation Manager will also be responsible for pest and disease control. All records and logging pertaining to cultivation and pest/disease management, including Seed-to-Sale tracking, will be the responsibility of the Cultivation Manager. This position reports directly to the Director of Operations. Their duties include, but are not limited to:

1. Maintaining a healthy environment for plants;
2. Ensuring proper growth;
3. Recording information pertaining to plants;
4. Maintaining feed cycles; and
5. Proper fertilization.

*Dispensary Manager* – Each Dispensary Manager will be responsible for a single, designated Dispensary location. The Dispensary Manager will sign off on all medical cannabis purchases when on duty and will need to meet the qualifications as a Certified Dispenser. This position reports to the Director of Dispensary Operations. They will be responsible for all operations of the retail store including but not limited to:

1. Dispensary staff training;
2. Staff scheduling;
3. Working as Certified Dispenser when needed;
4. Working with inventory control to verify received inventory and periodic inventory counts;
5. Ensuring operational supplies are maintained;
6. Ensuring sanitation standards are maintained; and
7. Maintaining store and staff appearance.

*Security Manager* - Security Manager shall be responsible for overall facility security. The Security Manager will also be responsible for keeping and maintaining all visitor logs. This position will assist Dispensary Managers in training of dispensary security guards. This position reports to the Director of Operations. Security Manager's duties include, but are not limited to:

1. Maintaining a safe work environment for all Applicant's employees;
2. Adherence to security requirements;
3. Conducting semiannual audits of security measures to identify areas of needed improvements/corrective actions;
4. Employee training on security measures and controls; and
5. Prevention of diversion/theft of cannabis and/or cannabis products.

**13.5 Job descriptions of all non-managerial employee positions, showing clear delineation of qualifications and duties**

When managing staff, Applicant plans to utilize employee management software to alleviate the stress of manually running operations such as dispensary payroll, scheduling, onboarding, or time clock adjustments.

Though software can eliminate the need for many of these procedures, additional procedures may be necessary.

**AL ST 8-27-1 et seq.**

# AL ST 8-27-1 et seq.

*Facility Compliance Officer* - The Facility Compliance Officer will ensure that as products move through the facility, they are accurately accounted for and all steps are in compliance with Alabama Medical Cannabis Commission Regulations. They will conduct weekly and monthly inventory checks as well as periodic random checks. In addition to other duties, the Facility Compliance Officer will ensure all departments maintain proper records and documentation. Additionally, the Facility Compliance Officer will oversee the use and implementation of seed-to-sale software. This position reports to the Director of Operations.

*Financial Controller* - The Financial Controller will be responsible for all accounting functions which include, but are not limited to: inventory control (working with Compliance Officer), accounts payable, payroll, general ledger, purchasing, and financial statement preparation. The company may elect to hire a CPA firm to provide these services. This position reports to the Director of Operations.

*Cultivation Assistant* - Cultivation Assistant will follow protocol set forth by the Cultivation Manager. Duties will include, but are not limited to: feeding, maintaining a clean work environment, documenting pertinent information related to plant progress, seed to sale tracking, and management of pest and disease. This position reports to the Cultivation Manager.

*Assistant Cultivation Director* - The Assistant Cultivation Director will assist Director of Cultivation in all duties and will assume lead role when Director of Cultivation is not at the facility. This position reports to the Cultivation Manager.

*Product/Packaging Assistant* - The Product/Packaging Assistants will assist the Products Production Manager in the processing and creation of both edible and non-edible products.



Duties will include, but are not limited to: putting together components necessary for individual edible recipes, assisting in the creation of edible and non-edible products, maintaining a safe and sanitary work environment, and adhering to all regulations set forth by the Alabama Health Department and Alabama Commission of Medical Cannabis. This position reports to the Director of Extractions/Products.

*Administrative Assistant* – The Administrative Assistant’s duties will include, but are not limited to: organization of meetings and appointments, recording pertinent information discussed in meetings, maintaining records needed by regulatory board, management of product orders and product deliveries, general record keeping, and any other duties as assigned by the Director of Operations.

*Production Facility Security Guard* – The Security Guards will ensure only authorized Applicant employees, law enforcement, and regulatory agents gain access to facility. Other duties will include, but are not limited to: maintaining a safe environment for employees, regular perimeter checks, inspection of fencing to ensure no access points for would be intruders, maintaining records of all guests to facility, and monitoring of surveillance footage of facility and perimeter. Position reports to the Security Manager.

*Dispensary Security Guard* – The Dispensary Security Guard will verify patrons’ IDs and that they possess valid authorization to purchase cannabis products (and if necessary are accompanied by a guardian). They will ensure the building is secure upon opening and after closing. They will ensure that all necessary security equipment is in functioning order. If required, they will verify product inventory, receipt or returns, and the inventory control manager or store manager. This position reports to the Dispensary Manager.

*Lead Dispensing Agent* – The Lead Dispensing Agent will be available to assist patrons with securing the appropriate medical cannabis product and will sign off on all purchases while on duty. Additionally, this position will serve as dispensary manager in absence of Dispensary Manager and will meet requirements of Certified Dispenser. This position reports to the Dispensary Manager.

*Transport Supervisor* – The Transport Supervisor will schedule and manage transport drivers, as well as serve in the capacity of a transport driver when required. This position reports to the Director of Operations.

*Transport Driver* – The Transport Drivers will be responsible for transporting new product to dispensaries, returning product if necessary to the Processing Center, and transporting waste to the disposal department. The position will also maintain vehicles by insuring regular and non-regular maintenance is performed by a pre-identified and approved repair facility, as well as maintaining vehicles cleanliness with regular washing and detailing. Additionally, the transport drivers will document deliveries and receipts. The drivers will maintain documentation with appropriate signatures for all transport operations.

*Disposal Operator* – The Disposal Operators will receive and then dispose of all cannabis waste materials by utilizing the designated disposal process. The disposal process will be performed in a designated area recorded via surveillance coverage. The Disposal Operator will sign for all materials received for disposal. Additionally, disposals will be viewed and verified by another employee not part of the cultivation, processing, or packaging teams. This position reports to Director of Operations.

*Dispensing Assistant* – The Dispensing Assistant will verify that identification and a valid license to purchase cannabis products are presented, assist customer with selection of appropriate product, as well as assist Lead Dispensary Agent and Dispensary Manager as needed. This position reports to Dispensary Manager (or Lead Dispensing Agent in Manager's absence).

*Dispensary Inventory Control Agent* – The Dispensary Inventory Control Agent will be responsible for receiving cannabis products and maintaining inventory of same. To verify the inventory system matches physical counts, this position will do periodic counts with the Dispensary Manager, Lead Dispensary Agent, or Security (if first two are unavailable). The periodic counts will be performed at a minimum of weekly, monthly, and annually. The Dispensary Inventory Control Agent will coordinate with the processing facility in the event product is to be returned for any reason (stale inventory, recalled inventory, etc.). This position reports to the Dispensary Manager.

**13.6 Executive summary, including mission statement, leadership background/qualifications, business style and philosophy, key personnel, identification of facility locations and functions**

In May of 2021, the State of Alabama passed legislation legalizing the use of medical cannabis for a number of medical conditions. In 2022, Larry Wireman of L&J, LLC and Tom Moore of MC Holdings, LLC agreed to a joint venture to participate in the medical cannabis industry in Alabama with the goal of becoming one of the five Integrated Facilities. This new entity is the Applicant.

Mr. Wireman and Mr. Moore have years of successful business endeavors with construction, real estate development, disaster repairs, and cleanup, among others.

The Alabama market is expected to be comparable to other states that has legalized certain types of products utilizing medical cannabis, but do not allow patients to smoke the flower

**AL ST 8-27-1 et seq.**

Applicant will focus on product quality, safety, and customer satisfaction. Our focus will be to delivering safe and high-quality medicinal cannabis products in a comfortable environment.

**AL ST 8-27-1 et seq.**

Mission Statement: “[Applicant]’s emphasis will be product quality and safety and promoting a positive and welcoming attitude for our customers. Our goal is for customer satisfaction and safety in all our interactions.”

13.7 Description of services/products to be cultivated/processed/transported/dispensed/tested at each facility

**AL ST 8-27-1 et seq.**

All medical cannabis products must be medical grade product, manufactured using documented good quality practices, and meet Good Manufacturing Practices, such that the product is shown to meet intended levels of purity and be reliably free of toxins and contaminants. Medical cannabis products will not contain any additives other than pharmaceutical grade excipients.

As directed by Alabama regulations, Applicant will only produce non-smokable medical cannabis products. These products include:

**AL ST 8-27-1 et seq.**

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

**13.9 Community engagement plan**

Applicant will work in the communities in which we are located with local community leaders [REDACTED] [REDACTED] [REDACTED] [REDACTED] AL ST 8-27-1 et seq. [REDACTED].

The objectives of these outreach programs will be:

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

**13.10 Environmental Impact Statement**

We feel very strongly about mitigating our environmental footprint to the greatest extent

**AL ST 8-27-1 et seq.**

Other controls Applicant will put in place to mitigated environmental impact are listed below:

**AL ST 8-27-1 et seq.**

**13.11 Insurance plan, including declarations pages and letters of intent from an A-rated insurer as to casualty, workers' comp, liability, and auto/fleet policy**

See Attachment 2 for letter of intent from insurance company.

**AL ST 8-27-1 et seq.**

# Exhibit 13 - Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

See below for Applicant's organizational chart.

AL ST 8-27-1 et seq.

## Exhibit 13 - Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

See below for Applicant's letter of intent to provide insurance from [REDACTED] insurance company.



AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 14 – Business Relationships with Other Licensees

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

**14.1 - Any Cultivator or prospective Cultivator**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**14.2 - Any Processor or prospective Processor**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**14.3 - Any Secure Transporter or prospective Secure Transporter**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**14.4 - Any Dispensary or prospective Dispensary**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**14.5 - Any Integrated Facility or prospective Integrated Facility**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**14.6 - Any State Testing Laboratory or prospective State Testing Laboratory**

Applicant currently has no contractual agreements or business relationships with Cultivators or Prospective Cultivators, Processor or Prospective Processors, Transporters or Prospective Transporters, Integrated Facilities or Prospective Integrated Facilities, or Dispensaries or Prospective Dispensaries.

**License Type: Integrated Facility**

Applicant will work with an Alabama-licensed testing facility or facilities once such operations have been licensed and Applicant has begun cultivation and processing of medical cannabis products.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 15 – Coordination of Information from Physicians

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**15 – Coordination of Information from Physicians**

In order to ensure patients do not exceed medical cannabis limits set forth by the Alabama

**AL ST 8-27-1 et. seq.**

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act at AL ST 8-27-1 et seq.

## Exhibit 16 – Point of Sale Responsibilities

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 17 – Confidentiality of Patient Information

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

# Exhibit 18 – Money Handling and Taxes

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date



Pursuant to 20-2A-80, Applicant will add to each patient's purchase the 9% tax on sales of medical cannabis at the point of sale. The proceeds for the sale including the required tax will be collected by a certified dispenser. Funds collected will be prepared for deposit (or secured storage). On a monthly basis, Applicant will prepare necessary tax forms as required by the state and remit the collected taxes to the state.

Due to the unique situation of the cannabis industry, whether recreational or medical, traditional banking has been a difficulty in the industry. As increasing numbers of states have legalized cannabis usage, particularly with medical use, an increasing number of banking establishments, particularly state-chartered banks and credit unions, have elected to participate. As of this date, it is unknown if any such financial institutions in Alabama will

**AL ST 8-27-1 et. seq.**

participate. Banking fees, particularly the fees associated with such institutions are steep and the use of such a firm to facilitate banking needs will be considered only as a final option. Additionally, there are firms which utilize virtual wallets as a means to allow credit card usage within the dispensary environment,

**AL ST 8-27-1 et. seq.**

**AL ST 8-27-1 et. seq.**

AL ST 8-27-1 et. seq.

#### Security, Accounting, and Cash Management Protocols and Procedures

Cannabis dispensaries face many challenges when storing and moving cash from the store to the bank. Since dispensaries are not legal at the federal level in the United States, they are limited in the services they can receive from banks. As a result of those limitations, dispensaries struggle with large amounts of cash being stored on the dispensary's premises, so tight procedures surrounding how to navigate these challenges are crucial.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 19 – Standard Operating Procedures

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

19.1 IT plan for ensuring accurate recordkeeping, compliance with inventory protocols, and coordination of info and systems with vendors, customers and others through the AL Medical Cannabis Patient Registry System (20-2A-35); the seed to sale tracking system; third party inventory control/tracking system if applicable.

**AL ST 8-27-1 et. seq.**

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

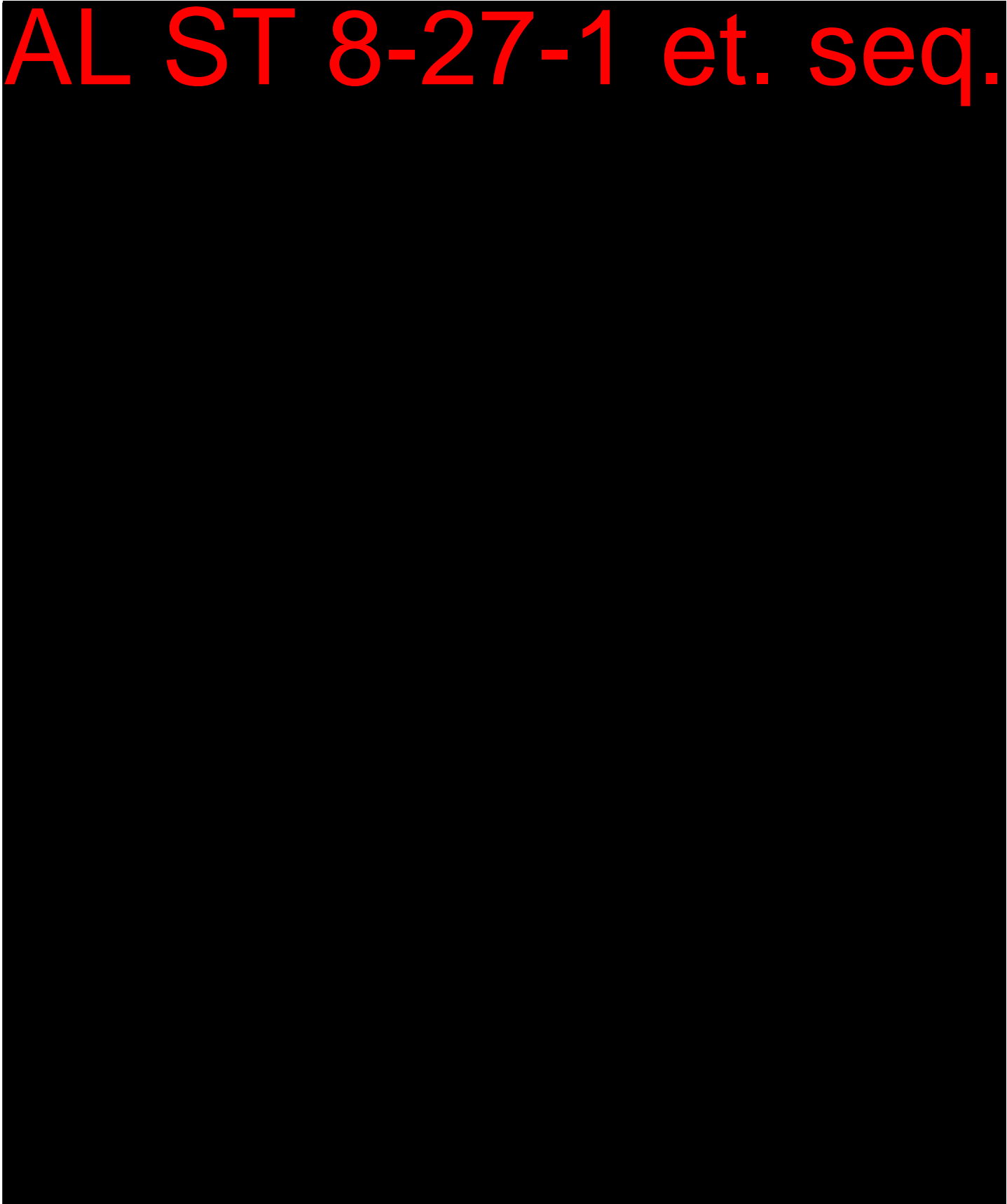
AL ST 8-27-1 et. seq.

19.2 Plan for Maintenance and Storage of Cannabis

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

19.3 Quality control/quality assurance plan

AL ST 8-27-1 et. seq.

19.4 Contamination and Recall Plan

AL ST 8-27-1 et. seq.

19.5 Criminal Activity Plan

AL ST 8-27-1 et. seq.

19.6 Emergency Procedures/Disaster Plan

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

19.7 Alcohol, Smoke, and Drug-Free Workplace Policy

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

19.8 Employee Safety Plan in Compliance with Parallel OSHA standards

AL ST 8-27-1 et. seq.

19.9 Confidential Info/Cybersecurity Plan

AL ST 8-27-1 et. seq.

19.10 Plan for Tracking and Proper Disposal of Waste

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

19.11 Security Plan

AL ST 8-27-1 et. seq.

19.12 Grow plan

AL ST 8-27-1 et. seq.

19.13 Engineering Plans/Specifications

AL ST 8-27-1 et. seq.

19.14 Detailed plan to ensure chain of custody, inventory, and tracking and interface with seed-to-sale system

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 20 – Policies and Procedures Manual

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**Table of Contents**

<b>Accounting Policies and Procedures</b>	<b>6</b>
General Statement on Accounting Policies and Procedures	6
Internal Control	6
Financial Statement Review and Audit	7
Financial Reports	7
Budget Development, Overview, and Responsibility	7
Cash Management	8
Petty Cash	9
Accounts Receivable	9
Purchases	10
Receiving	10
Inventories	11
Accounts Payable	11
Accrued Expenses and Prepaid Expenses	12
Cash Receipts	12
Cash Disbursements	13
Payroll	13
Payroll Taxes	14
Fixed Assets	15
Travel and Entertainment	16
Employee Expenses and Advance	16
Long Term Debt	17



Record Retention_____	17
Personnel Files_____	17
<b>Dispensary Operating Procedures_____</b>	<b>18</b>
Sale and Distribution_____	19
Prohibited Actions_____	21
<b>Employee Safety – OSHA Compliance_____</b>	<b>23</b>
Safety Education and Training Program _____	23
Training Areas_____	23
Training Documentation_____	24
Safety and Health Program_____	24
Hazard Communication_____	24
Safety and Health Communication_____	25
Reporting of Safety and Health Hazards_____	25
Postings_____	25
Training_____	25
Employee Safety Handbook_____	25
Safety Committee_____	26
Hazard Identification and Communication_____	27
List of Hazardous Chemicals_____	27
Material Safety Data Sheets (MSDS's)_____	28
MSDS Responsibility_____	28
Labels and Other Forms of Warning_____	28

Non-Routine Tasks	29
Training	29
Contractor Employees	30
Identification of Workplace Hazards	30
<b>Employee Safety Handbook</b>	<b>33</b>
First Aid and Medical Treatment	34
Non-Emergency Medical Treatment	34
Emergency Medical Treatment	35
Employee Safety Rules	37
<i>GENERAL SAFETY RULES</i>	37
<i>FIRE SAFETY</i>	37
<i>HAND TOOL SAFETY</i>	38
<i>MATERIAL HANDLING SAFETY RULES</i>	39
Personal Protective Equipment	39
Housekeeping	40
Property Maintenance	41
Fire Reporting and Procedure	41
First Aid	42
Hazardous Material Spill	42
After an Earthquake	43
Robbery	43
Opening Conference	46

The Walk Around Inspection_____	<b>46</b>
Closing Conference_____	<b>47</b>
Post Inspection Activities_____	<b>47</b>
OSHA Record Keeping and Posting Requirements_____	<b>48</b>
Record Retention_____	<b>48</b>
Common OSHA Violations_____	<b>48</b>
Blood Borne Pathogens_____	<b>50</b>
Hazardous Material Spill Response_____	<b>54</b>

Accounting Policies and Procedures

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

Dispensary Operating Procedures

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

Employee Safety – OSHA Compliance

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 21 – Production and Manufacturing Process

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

# Exhibit 21 - Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

License Type: Integrated Facility

See below for Applicant's schematics of Cultivation, Processing, and Transportation facility.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 22 – Machinery and Equipment

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

AL ST 8-27-1 et seq.

# Exhibit 22 - Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

## Exhibit 22 – Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

**AL ST 8-27-1 et seq.**



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

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AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 23 – Receiving and Shipping Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

Attorney

Title of Verifying Individual

Julie B. Mitchell

Signature of Verifying Individual

12.30.2022

Verification Date

23.1 - Individual batches of cannabis being received for storage/processing were appropriately prepared, tagged, or otherwise identified, and inserted in containers at time

AL ST 8-27-1 et. seq.

23.2 – Batches and containers arriving from a cultivator have been QR coded or otherwise digitally coded to identify, at a minimum, the Cultivator, facility, plant tag identification number, date of harvest, and the date of the cultivator’s State Laboratory testing approval.

**AL ST 8-27-1 et. seq.**

23.3 – Incoming cannabis is accompanied by the secure transporter’s manifest and other appropriate documentation; the information thereon is accurate and has been duly executed by all appropriate parties.

**AL ST 8-27-1 et. seq.**

23.4 – All information from the QR code relating to the incoming cannabis, as well as the date and time of arrival, has been logged into the Statewide-Seed-to-Sale Tracking System.

**AL ST 8-27-1 et. seq.**

23.5 – Individual batches of medical cannabis products being shipped from a facility operated by an Integrated Facility to a Dispensary or Cultivator by means of a Secure Transporter must be appropriately packaged, labeled, and inserted in containers prior to transport.

**AL ST 8-27-1 et. seq.**

23.6 – Batches and containers being shipped from the Applicant’s facility must be QR coded or otherwise digitally coded to identify, at a minimum, the Integrated Facility, facility, type of product, date of processing and packaging, and the date of the Integrated Facility’s State Laboratory testing approval(s).

**AL ST 8-27-1 et. seq.**

23.7 – Outgoing medical cannabis is accompanied by the Secure Transporter’s manifest and other appropriate documentation; the information thereon is accurate and has been duly executed by all appropriate parties.

**AL ST 8-27-1 et. seq.**

23.8 – All information from the QR code relating to the outgoing medical cannabis, as well as the date and time of shipment, has been logged into the Statewide-Seed-to-Sale Tracking System of receipt

**AL ST 8-27-1 et. seq.**

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 24 – Secure Transport Vehicles

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



**24.1 – Title, lease or other documentation demonstrating possessory interest in all vehicles to be used for secure transportation of cannabis or medical cannabis.**

Not Started, but completion expected 90 days *after* award of license.

**24.2 – Copies of declarations pages of insurance policies applicable to all vehicles to be owned and operated by the Applicant, particularly those proposed for the secure transport of cannabis or medical cannabis.**

Not Started, but completion expected 90 days *after* award of license.

**24.3 – License plate numbers and DOT numbers, if available, for all secure transport vehicles.**

Not Started, but completion expected 90 days *after* award of license.

All redactions are made in effort to preserve individual privacy and security.  
The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII).  
The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below.  
Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 25 – Compliance with Alabama Public Service Commission Requirements

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

Applicant shall ensure all transporters comply will all regulations set forth by the Alabama Department of Transportation as well as the Alabama Public Service Commission. Steps will

**AL ST 8-27-1 et. seq.**

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 26 – Commercial Drivers Licenses

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

License Type: INTEGRATED FACILITY

Not Started, but completion expected 90 days *after* award of license.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 27 – Fleet Summary

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

See below for Applicant's proposed/potential vehicles.

**AL ST 8-27-1 et. seq.**



AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 28 – Care and Maintenance of Vehicles

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

Applicant will be operating secure storage vehicles to transport medical cannabis products.  
The Transportation Supervisor will oversee and adhere to a written maintenance plan.

**AL ST 8-27-1 et. seq.**

**MAINTENANCE PROCEDURES**

**AL ST 8-27-1 et. seq.**

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

ASSET INVENTORY

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 29 – Route Plans

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



**Route Plans**

Security in this industry is a great concern, not only for our employees but the general public

**AL ST 8-27-1 et. seq.**

All redactions are made in effort to preserve individual privacy and security.  
The State of Alabama has an interest in protecting Applicants from  
inappropriate dissemination of Personally Identifiable Information (PII).

The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as  
all relevant AL statutes, are applicable as redacted and noted below.

Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 30 – Plan for Segregation of Processes within Transportation between Facilities

## Verification

The undersigned verifies that the information contained in this exhibit, including any  
attachments thereto, is accurate and complete, based on the best available  
information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

Attorney

Title of Verifying Individual

Julie B. Mitchell

Signature of Verifying Individual

12.30.2022

Verification Date

Applicant, following Secure Transporter regulations pursuant to § 20-2A-65, Code of Alabama 1975 (as amended), shall operate in accordance with all provisions of the Alabama Medical Cannabis Commission. In doing so, Applicant shall adopt segregation plans for cannabis transportation.

Due to the nature of this market, special guidelines must be taken into consideration when transporting medical cannabis products. The safety of our employees and the general public, security of the medical products and loss and diversion are some of Applicant's greatest concerns. To safeguard our company to the fullest extent possible as well as adhering to the AMCC regulation, steps will be taken to mitigate these issues.

**AL ST 8-27-1 et. seq.**

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

# Exhibit 31 – Facilities

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell

Printed Name of Verifying Individual

attorney

Title of Verifying Individual

Julie B. Mitchell

Signature of Verifying Individual

3/3/23

Verification Date

**CULTIVATION FACILITY**

**31.1 – The facility name and type.**

Name – Alabama Medical Grow Production Center

Type – Cultivation, Processing, Transportation

*Disposal will also be handled at this site dependent on applicable regulations.*

**31.2 – The physical address and GPS coordinates of the facility.**

Address – 17195 HWY 98

Foley, AL 36535

GPS - 30.40774 N 87.73088 W

**31.3 – An aerial photograph of the facility, including clearly identified site boundaries.**

See Attachment 1.

**31.4 – Proof of authorization for the Applicant to occupy the property where the facility is proposed to be located.**

See Attachment 4 for Contingent Lease.

**31.5 – Proof of local zoning and other approvals necessary to operate the business in the local jurisdiction where the business is located, including but not limited to the local jurisdiction's ordinance or resolution approving the operation of medical cannabis facilities there.**

See Attachment 2.

**31.6 – A professionally rendered blueprint (or, if not available, a professionally rendered floorplan or schematic) of the facility, showing clearly drawn and labeled interiors of the facility, including but not limited to the general function of each area of the structure, for ease in identification of operations and processes by the Commission during future inspections.**

See Attachment 6.



**31.7 – A timetable for completion and commencement of operations as to the facility.**

AL ST 8-27-1 et seq.

**31.8 – A statement whether the facility shall be open to the public and if so the anticipated hours of business operation.**

The cultivation facility will not be open to the public. Access will be limited to employees with current work badges and whose duties require access to facility.

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or unusual circumstances warrant (weather emergency, for example) additional hours may be required. Such additional hours of operation must be approved by the Director of Operations.

**31.9 – The hours of operation during which the facility will be occupied by Applicant’s employees; if not continuous, the after-hours contact information for management.**

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or unusual circumstances warrant (weather emergency, for example) additional hours may be required. Such additional hours of operation must be approved by the Director of Operations.

After hours contact in case of emergency or regulatory need will be with the Director of Operations. Business telephone and business email will be made available.

**PROCESSING FACILITY**

**31.1 – The facility name and type.**

Name – Alabama Medical Grow Production Center

Type – Cultivation, Processing, Transportation

*Disposal will also be handled at this site dependent to applicable regulations.*

**31.2 – The physical address and GPS coordinates of the facility.**

Address – 17195 HWY 98

Foley, AL 36535

GPS - 30.40774 N 87.73088 W

**31.3 – An aerial photograph of the facility, including clearly identified site boundaries.**

See Attachment 1.

**31.4 – Proof of authorization for the Applicant to occupy the property where the facility is proposed to be located.**

See Attachment 4 for contingent lease for processing facility.

**31.5 – Proof of local zoning and other approvals necessary to operate the business in the local jurisdiction where the business is located, including but not limited to the local jurisdiction’s ordinance or resolution approving the operation of medical cannabis facilities there.**

See Attachment 2.

**31.6 – A professionally rendered blueprint (or, if not available, a professionally rendered floorplan or schematic) of the facility, showing clearly drawn and labeled interiors of the facility, including but not limited to the general function of each area of the structure, for ease in identification of operations and processes by the Commission during future inspections.**

See Attachment 6.

**31.7 – A timetable for completion and commencement of operations as to the facility.**

**AL ST 8-27-1 et seq.**

# AL ST 8-27-1 et seq.

**31.8 - A statement whether the facility shall be open to the public and if so the anticipated hours of business operation.**

The facility will not be open to the public. Access will be for employees with current work badges and whose duties require access to facility.

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or unusual circumstances warrant (weather emergency, for example) additional hours may be required. Such additional hours of operation must be approved by the Director of Operations.

**31.9 - The hours of operation during which the facility will be occupied by Applicant's employees; if not continuous, the after-hours contact information for management.**

License Type: Integrated Facility

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or unusual circumstances warrant (weather emergency for example) additional hours may be required. Such additional hours of operation must be approved by the Director of Operations.

After hours contact in case of emergency or regulatory need will be with the Director of Operations. Business telephone and business email will be made available.

**TRANSPORTATION FACILITY**

**31.1 – The facility name and type.**

Name – Alabama Medical Grow Production Center

Type – Cultivation, Processing, Transportation

*Disposal will also be handled at this site dependent to applicable regulations.*

**31.2 – The physical address and GPS coordinates of the facility.**

Address – 17195 HWY 98

Foley, AL 36535

GPS - 30.40774 N 87.73088 W

**31.3 – An aerial photograph of the facility, including clearly identified site boundaries.**

See Attachment 1.

**31.4 – Proof of authorization for the Applicant to occupy the property where the facility is proposed to be located.**

See Attachment 4 for contingent lease.

**31.5 – Proof of local zoning and other approvals necessary to operate the business in the local jurisdiction where the business is located, including but not limited to the local jurisdiction's ordinance or resolution approving the operation of medical cannabis facilities there.**

See Attachment 2.

**31.6 – A professionally rendered blueprint (or, if not available, a professionally rendered floorplan or schematic) of the facility, showing clearly drawn and labeled interiors of the facility, including but not limited to the general function of each area of the structure, for ease in identification of operations and processes by the Commission during future inspections.**

See Attachment 6.

**31.7 – A timetable for completion and commencement of operations as to the facility.**

**AL ST 8-27-1 et seq.**

# AL ST 8-27-1 et seq.

**31.8 - A statement whether the facility shall be open to the public and if so the anticipated hours of business operation.**

The facility will not be open to the public. Access will be for employees with current work badges and whose duties require access to facility.

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or delivery delays warrant, additional hours may be required. Such additional hours of operation must be approved by the Director of Operations. Hours of operation may be altered to address any weather emergencies or adverse conditions.

**31.9 - The hours of operation during which the facility will be occupied by Applicant's employees; if not continuous, the after-hours contact information for management.**

The standard hours of operation will be 8:00 am to 5:00pm Monday through Friday. If business conditions or delivery delays warrant, additional hours may be required. Such

License Type: Integrated Facility

additional hours of operation must be approved by the Director of Operations. Hours of operation may be altered to address any weather emergencies or adverse conditions.

After hours contact in case of emergency or regulatory need will be with the Director of Operations. Business telephone and business email will be made available.



**DISPENSARY 1 – FOLEY LOCATION**

**31.1 – The facility name and type.**

Name – APPLICANT Foley

*Name is likely to change as process progresses.*

Type – Dispensary

**31.2 – The physical address and GPS coordinates of the facility.**

Address – 18267 HWY 98

Foley, AL 36535

GPS – 30.40717 N 87.71269 W

**31.3 – An aerial photograph of the facility, including clearly identified site boundaries.**

See Attachment 3.

**31.4 – Proof of authorization for the Applicant to occupy the property where the facility is proposed to be located.**

See Attachment 5 for contingent lease.

**31.5 – Proof of local zoning and other approvals necessary to operate the business in the local jurisdiction where the business is located, including but not limited to the local jurisdiction's ordinance or resolution approving the operation of medical cannabis facilities there.**

See Attachment 2.

**31.6 – A professionally rendered blueprint (or, if not available, a professionally rendered floorplan or schematic) of the facility, showing clearly drawn and labeled interiors of the facility, including but not limited to the general function of each area of the structure, for ease in identification of operations and processes by the Commission during future inspections.**

In progress with completion expected 60 days *before* award of license.

**31.7 – A timetable for completion and commencement of operations as to the facility.**

**AL ST 8-27-1 et seq.**

**31.8 – A statement whether the facility shall be open to the public and if so the anticipated hours of business operation.**

The facilities will be open to the public (valid medical marijuana card holders only - UNDERAGE CARD HOLDERS must be accompanied by guardian/caregiver) Monday through Saturday 9:30 am until 6:30 pm. Operational hours will be 9:00 am until 7:00 pm for employees performing opening procedures, closing procedures, and displaying or securing inventory. These hours may be adjusted as business needs dictate.

**31.9 – The hours of operation during which the facility will be occupied by Applicant's employees; if not continuous, the after-hours contact information for management.**

The facilities will be open to the public (valid medical marijuana card holders only UNDERAGE CARD HOLDERS) Monday through Saturday 9:30 am until 6:30 pm. Operational hours will be 9:00 am until 7:00 pm for employees performing opening procedures, closing procedures, and displaying or securing inventory. These hours may be adjusted as business needs dictate.

After hours contact in case of emergency or regulatory need will be with the Director of Dispensary Operations or the specific Dispensary Manager. Business telephone and business email will be made available.

**DISPENSARIES 2-5**

**AL ST 8-27-1 et seq.**

# Exhibit 31 - Attachment 1

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

**License Type: Integrated Facility**

See below for aerial photo of cultivation, processing, and transportation facility.

**Alabama Medical Grow – 31.3 (Same for Cultivation, Processing, Transportation)**

Facility Aerial Photo – with site boundaries



## Exhibit 31 – Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

See below for Foley, AL's ordinance authorizing medical cannabis establishments.



This Instrument Prepared By:

**City of Foley, AL**



**Signature Copy**

**Ordinance: 22-2039 ORD**

407 E. Laurel Avenue  
Foley, AL 36535

**File Number: 22-0515**

**Enactment Number: 22-2039 ORD**

**AN ORDINANCE AUTHORIZING THE OPERATION OF MEDICAL CANNABIS  
DISPENSING SITES WITHIN THE CITY OF FOLEY**

WHEREAS, in the 2021 legislative session the Alabama Legislature passed Act. No. 21-450 (the "Act"), legalizing and creating a regulatory framework for medical cannabis; and

WHEREAS, the Alabama Legislature made a number of findings of fact, including:

"Medical research indicates that the administration of medical cannabis can successfully treat various medical conditions and alleviate the symptoms of various medical conditions."

"There are residents in Alabama suffering from a number of medical conditions whose symptoms could be alleviated by the administration of medical cannabis products if used in a controlled setting under supervision of a physician licensed in this state."

"Establishing a program providing for the administration of cannabis derivatives for medical use in this state will not only benefit patients by providing relief to pain and other debilitating symptoms, but also provide opportunities for patients with these debilitating conditions to function and have a better quality of life and provide employment and business opportunities for farmers and other residents of this state and revenue to state and local governments;" and

WHEREAS, the Act provides for the medical use of medical grade products that contain a derivative of cannabis by a registered qualified patient; and

WHEREAS, this Act requires that the governing body of a municipality must first adopt an ordinance to authorize the operation of dispensing sites within the corporate limits of the municipality before any such business can operate in the municipality; and

WHEREAS, the Act has become law and codified as Code of Alabama, §§ 20-2A-1, et seq.; and

WHEREAS, the City of Foley wishes to authorize the operation of medical cannabis dispensing sites within the corporate limits of the City of Foley subject to zoning, business license, and other revenue and police power requirements.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF FOLEY, ALABAMA that, in accordance with Alabama Code, Section 20-2A-51, a holder of a license granted by the State of Alabama pursuant to Act 21-450 is hereby authorized to operate a medical cannabis dispensing site within the corporate limits of the City of Foley, subject to the provisions of Act 21-450 and state law, and further subject to any relevant provisions of the Code of the City of Foley, including applicable zoning restrictions, business license requirements, and similar matters.

PASSED, APPROVED AND ADOPTED this 19th day of September 2022.



President's Signature J.W. Trussell

Date 9-19-22

Attest by Clerk Kathryn Taylor

Date 9-19-22

Mayor's Signature [Signature]

Date 9/19/22

## Exhibit 31 - Attachment 3

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

See below for aerial photo of Foley Dispensary location.

**Alabama Medical Grow – 31.3**

Aerial Photo with boundaries

Foley Dispensary location



# Exhibit 31 - Attachment 4

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

a Horney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

See below for contingent lease for cultivation, processing, and transportation location.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

# Exhibit 31 - Attachment 5

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

See below for contingent lease for dispensary location.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

# Exhibit 31 - Attachment 6

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

See below for Applicant's schematics of Cultivation, Processing, and Transportation facility.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 32 – Engineering Plans and Specifications for Cultivation Facilities

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

  
Signature of Verifying Individual

12.30.2022  
Verification Date

In progress with completion expected 90 days *after* award of license.

The engineering plans and specifications Applicant's cultivation facility shall include the following:

- A detailed plan and elevation drawings of all operational areas involved with the production of cannabis plants. This should include dimensions and elevation referenced to a single-facility benchmark.
- Cross-sections that show the construction details and their dimensions to provide verification of construction materials, enhancement for security measures, and biosecurity measures.
- Identification of all employee-accessible nonproduction areas.
- The location, size, and capacity of all storage areas, ventilation systems, and equipment used for the production of cannabis.
- The location and door material specifications of all entrances and exits to the cultivation facility, as well as the physical makeup and specifications of all outer walls of the enclosed structure.
- The location and specifications of any windows, skylights and roof hatches.
- The location of all monitoring cameras and their field of view, verified to be operating 24 hours per day.
- The location of all alarm inputs (door contacts, motion detectors, duress/hold up devices) and alarm sirens.
- The location of the digital audio/video recorder and alarm control panel.
- The location of all restricted, employee-accessible and public areas.
- The location where all plant inputs and application equipment are stored.
- The location of all enclosed, secure areas or loading/unloading docks out of public view for the loading/unloading of cannabis or medical cannabis into or out of any motor vehicle for secure transport.
- The location of any area used to store medical cannabis that has been returned to the cultivation facility from a processor or dispensary.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 33 – Security Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date



33.1 – Alarm Systems

AL ST 8-27-1 et. seq.

33.2 – Panic Alarms

AL ST 8-27-1 et. seq.

33.3 – Broadcast communication devices

AL ST 8-27-1 et. seq.

33.4 – Audio/Video Surveillance System

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

33.5 - Lighting and Perimeter

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

33.6 – Exterior doors

AL ST 8-27-1 et. seq.

33.7 – Exterior walls and windows

AL ST 8-27-1 et. seq.

33.8 – Sufficient staffing of security guards at each facility

AL ST 8-27-1 et. seq.

33.9 – Strict access controls

AL ST 8-27-1 et. seq.

33.10 – Protocols for beginning-of-day and end-of-day movements

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

33.11 - Access to Dispensaries

AL ST 8-27-1 et. seq.

33.12 - Records

AL ST 8-27-1 et. seq.

33.13 - Employees, while on duty, shall wear identification badges that clearly identify them as employees.

AL ST 8-27-1 et. seq.

33.14 - Visitor Badges

AL ST 8-27-1 et. seq.

33.15 – Theft, diversion, or other loss of cannabis products

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

33.16 – Signage.

AL ST 8-27-1 et. seq.

33.17 – Variable route plans and GPS tracking systems

AL ST 8-27-1 et. seq.



AL ST 8-27-1 et. seq.

33.18 – Locks and Alarm Systems

AL ST 8-27-1 et. seq.

33.19 – Vehicle dashboard and storage area audio/video recording devices

AL ST 8-27-1 et. seq.

33.20 – Secure transport vehicles must be free of markings:

AL ST 8-27-1 et. seq.

33.21 – Cannabis and/or medical cannabis shall be kept in sealed tamper-evident containers and Storage

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.

33.22 - Visibility or recognizable outside the secure transport vehicle.

AL ST 8-27-1 et. seq.

33.23 - Panic/Hold-up Alarms

AL ST 8-27-1 et. seq.

33.24 - Emergency requiring stopping the vehicle

AL ST 8-27-1 et. seq.

33.25 - Control of Vehicle

AL ST 8-27-1 et. seq.

33.26 - Training regarding law enforcement and identification badges

AL ST 8-27-1 et. seq.

33.27 - Batch Labeling

AL ST 8-27-1 et. seq.

33.28 – Personnel

AL ST 8-27-1 et. seq.

33.29 – Alternative Routes and Deviations

AL ST 8-27-1 et. seq.

33.30 –GPS tracking and monitored throughout transit by APPLICANT's security center through Wi-Fi or hardwire networking technology.

AL ST 8-27-1 et. seq.

33.31 – APPLICANT’s verification regarding route plans, manifests, transport logs, freight bills, bills of lading and any free-on-board (“FOB”) terms of sale documents, maintenance and repair records, and insurance documentation

AL ST 8-27-1 et. seq.

AL ST 8-27-1 et. seq.



33.32 – Verification that, upon request, it will make available to the Commission or its inspectors all information relating to APPLICANT’s security plan

**AL ST 8-27-1 et. seq.**

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 34 – Personnel Roster

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

**FORM G: PERSONNEL ROSTER & VERIFICATION**

Alabama Medical Grow LLC

Business License Applicant Name

Integrated Facility

License Type

*Complete the following information, current to within thirty (30) days prior to the date of application, for all personnel (each leader and employee) affiliated with the Applicant. Attach additional forms if necessary.*

Winston Ceasear

Leader/Employee Name

Director of Operations

Title/Position

**FOIA (b) (6)**

Michael Yarbrough

Leader/Employee Name

Facility Compliance Officer

Title/Position

**FOIA (b) (6)**

Bradley Brimmer

Leader/Employee Name

Director of Extractions/Products

Title/Position

**FOIA (b) (6)**

---

Leader/Employee Name		Title/Position
SSN	Telephone	Email
Street Address		
City	State	Zip

---

---

Leader/Employee Name		Title/Position
SSN	Telephone	Email
Street Address		
<b>Carson</b>		
City	State	Zip

---

---

Leader/Employee Name		Title/Position
SSN	Telephone	Email
Street Address		
City	State	Zip

---

---

Leader/Employee Name		Title/Position
SSN	Telephone	Email
Street Address		
City	State	Zip

---

Leader/Employee Name

Title/Position

SSN

Telephone

Email

Street Address

City

State

Zip

Leader/Employee Name

Title/Position

SSN

Telephone

Email

Street Address

City

State

Zip

Leader/Employee Name

Title/Position

SSN

Telephone

Email

Street Address

City

State

Zip

**Applicant Verification:** The undersigned hereby verifies that the information provided hereinabove (and attached, as necessary) constitutes a complete and accurate roster of personnel of the Applicant. The undersigned further verifies that, if the Applicant is issued a business license, each individual listed hereinabove (and attached, as necessary) will be registered to the AMCC website and will undergo appropriate pre-employment background checks.

Julie B. Mitchell  
Printed Name of Verifying Individual

attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

3/3/23  
Verification Date

All redactions are made in effort to preserve individual privacy and security.  
The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII).  
The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below.  
Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 35 – Business Leadership Credentials

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

<u>Julie B. Mitchell</u>	<u>Attorney</u>
Printed Name of Verifying Individual	Title of Verifying Individual
<u>Julie B. Mitchell</u>	<u>12.30.2022</u>
Signature of Verifying Individual	Verification Date

**35.1 – A curriculum vitae for the business, demonstrating the education, experience, and other credentials of its leadership, including but not limited to all scientists and engineers, certified dispenser(s), and any other science- or engineering-based employees or employees with a business background (i.e., accounting, finance, managing, marketing, advertising, public relations, etc.) among its leadership and/or employed at each facility, including but not limited to all dispensing sites.**

Applicant is comprised of J&L, LLC and Delta South Hemp Company, LLC.

J&L, LLC is comprised of two members, Larry Wireman (Manager) and Judy Wireman (Majority member). The Wiremans bring a plethora of experience to the Cannabis industry in Alabama.

Since 2012 Judy and Larry have operated Republic Energy, LLC, an Alabama Limited Liability Company. This company has been dedicated to the conversion of renewable resources into energy and the use of the byproducts for agriculture. Republic Energy products have been used in several farms in south Alabama for fertilizer.

Also, as a natural continuation of the technology developed in our Foley production facility, our team has been working on creating innovative techniques to purify drinking water and clean algae overgrowth in bodies of water.

Our family of companies have also accomplished some of the most recognizable developments in Coastal Alabama. Caribe Resort and Turquoise Place were developed by our J&L Manager, Larry Wireman. Long before establishing himself as a staple in the Coastal Alabama development community, Larry grew up working his family's corn farm in Kentucky. Larry went on to own a pipe company that contracted on major water and oil and delivery systems (Alaskan Pipeline). He also owned an industrial HVAC company, essential to our proposed facility control. Our family of companies also includes an information technology company that writes software and constructs computer hardware for several applications. Currently, we are developing a water leak detection system. Part and parcel to developing a successful Medical Cannabis Integrated Facility will be the ability to develop

and maintain high level IT systems to monitor the environment, especially water systems. We have the existing staff with experience doing just that.

In addition to the 50 plus years of experience that Judy and Larry, J&L, LLC have in industries that are essential to a medical cannabis facility, J&L, LLC is joined MC Holdings, LLC, whose members bring impressive resumes of land and real estate development to the table. Tom Moore, majority owner of MC Holdings, LLC, has owned Moore Companies for 12 years, specializing in real estate development in Coastal Communities. Winston Ceasear, part-owner of MC Holdings, LLC, is a Black, Air Force Veteran, who has worked closely with Moore Companies in development and management.

These companies are uniquely suited to fund, operate, and manage an Alabama Medical Cannabis Integrated Facility because of their wealth of experience in the community, ability to bring in specialists to accomplish safe and effective operations of Medical Cannabis Facilities, and connections in the Cannabis Community across the country.

**35.2 – A detailed explanation of the role each leader, certified dispenser, scientist, businessperson, or engineer is to have in the operation of each facility.**

*Director Of Operations* - The Director of Operations will drive Applicant's long-term strategic planning process by overseeing and managing all aspects of production, transportation, disposal, and dispensary operations. The position will be responsible for ensuring staff training is maintained regarding safety, quality control, regulation adherence, and general staff expectations. This includes, but is not limited to:

1. Cultivation;
2. Extractions;
3. Cloning;
4. Product production and quality control; and
5. Inventory control.

*Director of Dispensary Operations* – The Director of Dispensary Operations will direct and supervise all Dispensary Managers. The position will review product business volume data and customer feedback to ensure the dispensaries are operating efficiently and maintaining a high standard regarding guest satisfaction and customer needs. This position will ensure



that the dispensaries are operated in the most efficient manner while maintaining the highest standards as to product safety and security. The position will work with the Director of Operations to coordinate product production based on the latest market demands. This position reports directly to the Director of Operations.

*Director Of Extractions/Products* - Director of Extractions will oversee all aspects of the extraction process. This position reports directly to the Director of Operations. Responsibilities include, but is not limited to:

1. Quality control;
2. Safe working conditions;
3. Maintaining a clean work environment; and
4. Ensuring all processes and products follow relevant regulation guidelines.

This position will oversee all aspects of product production. This will include, but not be limited to:

1. Creation of edible recipes;
2. Processes of edible production;
3. Preparation of products, maintaining a safe work environment; and
4. Adhering to all regulations set forth by the Alabama Health Department.

*Cultivation Manager* -The Cultivation Manager will oversee the growth of the plant from clone to harvest. The Cultivation Manager will also be responsible for pest and disease control. All records and logging pertaining to cultivation and pest/disease management, including Seed-to-Sale tracking, will be the responsibility of the Cultivation Manager. This position reports directly to the Director of Operations. Their duties include, but are not limited to:

1. Maintaining a healthy environment for plants;
2. Ensuring proper growth;
3. Recording information pertaining to plants;
4. Maintaining feed cycles; and
5. Proper fertilization.

*Dispensary Manager* – Each Dispensary Manager will be responsible for a single, designated Dispensary location. The Dispensary Manager will sign off on all medical cannabis purchases when on duty and will need to meet the qualifications as a Certified Dispenser. This position reports to the Director of Dispensary Operations. They will be responsible for all operations of the retail store including but not limited to:

1. Dispensary staff training;
2. Staff scheduling;
3. Working as Certified Dispenser when needed;
4. Working with inventory control to verify received inventory and periodic inventory counts;
5. Ensuring operational supplies are maintained;
6. Ensuring sanitation standards are maintained; and
7. Maintaining store and staff appearance.

*Security Manager* - Security Manager shall be responsible for overall facility security. The Security Manager will also be responsible for keeping and maintaining all visitor logs. This position will assist Dispensary Managers in training of dispensary security guards. This position reports to the Director of Operations. Security Manager's duties include, but are not limited to:

1. Maintaining a safe work environment for all Applicant's employees;
2. Adherence to security requirements;
3. Conducting semiannual audits of security measures to identify areas of needed improvements/corrective actions;
4. Employee training on security measures and controls; and
5. Prevention of diversion/theft of cannabis and/or cannabis products.

**35.3 – A 5-year hiring plan for its employees, identifying the types, positions, required education, required experience, and expected roles of such personnel.**

In progress with completion expected 90 days *after* award of license.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 36 – Employee Handbook

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

**Employment Basics**

Employees with full time status will be scheduled 35-40 hours per week, and employees with part time status will be less than 35 hours per week. Scheduled days may vary each week depending on the needs of the facility which are subject to change depending on the certain phases of cultivation and processing.

\*Alabama law follows the “employment at will” doctrine which gives an employer the right to dismiss for any reason an employee that was hired for a period of time or an indefinite term.\*

**Equal Opportunity Employment**

At APPLICANT, we believe in diversity within our organization. We utilize equal opportunity employment practices, fair labor practices, and employee protections. No employee of APPLICANT shall be harassed or discriminated against for any reason including, but not limited to: race, religion, sex (including, pregnancy, sexual orientation, and gender identity), national origin, disability, age, or genetic information. Reasonable accommodations will be made in cases of disability. APPLICANT’s plan of action is to inform, hire, and educate minorities, women, veterans, and persons with disabilities.

**Background Checks**

**AL ST 8-27-1 et seq.**

**Attendance**

**AL ST 8-27-1 et seq.**

AL ST 8-27-1 et seq.

Workplace Policies

AL ST 8-27-1 et seq.

Workplace Harassment

AL ST 8-27-1 et seq.

Workplace Violence

AL ST 8-27-1 et seq.

Workplace Safety and Health

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Preventative Action

AL ST 8-27-1 et seq.

Emergency Management

AL ST 8-27-1 et seq.

Employee Breaks

AL ST 8-27-1 et seq.

Smoking

AL ST 8-27-1 et seq.

Drug-Free Workplace

AL ST 8-27-1 et seq.

Code of Conduct

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Compensation and Development

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

General Employee Information

AL ST 8-27-1 et seq.

Working Hours, PTO and Vacation

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Employee Resignation and Termination

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 37 – Secure Transport Drivers

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

Not Started, but completion expected within 120 days *after* award of license.

**FORM H: SECURE TRANSPORT DRIVERS License Type: Integrated Facility**

Complete a separate form and verification for each of the Applicant's secure transport drivers.

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated Facility  
License Type

**Secure Transport Driver Information**

\_\_\_\_\_  
Secure Transport Driver Name                      Date of Birth                      SSN

**Driver's License Information**

\_\_\_\_\_  
Issued by (State)                      Number                      Issue Date                      Expiration Date

**Citations, Fines & Violations**

List all motor vehicle citations, fines, and violations received by the driver in the last three (3) years. Attach additional forms if necessary.

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge                      Issued By

\_\_\_\_\_  
Date of Occurrence                      Location (City/County)                      Location (State)

\_\_\_\_\_  
Disposition/Amount                      Date of Disposition

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge                      Issued By

\_\_\_\_\_  
Date of Occurrence                      Location (City/County)                      Location (State)

\_\_\_\_\_  
Disposition/Amount                      Date of Disposition

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge                      Issued By

\_\_\_\_\_  
Date of Occurrence                      Location (City/County)                      Location (State)

\_\_\_\_\_  
Disposition/Amount                      Date of Disposition

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge

\_\_\_\_\_  
Issued By

\_\_\_\_\_  
Date of Occurrence

\_\_\_\_\_  
Location (City/County)

\_\_\_\_\_  
Location (State)

\_\_\_\_\_  
Disposition/Amount

\_\_\_\_\_  
Date of Disposition

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge

\_\_\_\_\_  
Issued By

\_\_\_\_\_  
Date of Occurrence

\_\_\_\_\_  
Location (City/County)

\_\_\_\_\_  
Location (State)

\_\_\_\_\_  
Disposition/Amount

\_\_\_\_\_  
Date of Disposition

Type (select all that apply):  Citation  Fine  Violation

\_\_\_\_\_  
Violation/Charge

\_\_\_\_\_  
Issued By

\_\_\_\_\_  
Date of Occurrence

\_\_\_\_\_  
Location (City/County)

\_\_\_\_\_  
Location (State)

\_\_\_\_\_  
Disposition/Amount

\_\_\_\_\_  
Date of Disposition

**Applicant Verification:** The undersigned hereby verifies that the information provided hereinabove (and attached, as necessary) constitutes complete and accurate information for the secure transport driver identified hereinabove (and attached, as necessary). The undersigned further verifies that the secure transport driver identified hereinabove is at least 21 years of age and has a minimum of three (3) years driving experience.

Julie B. Mitchell  
Printed Name of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

attorney  
Title of Verifying Individual

3/3/23  
Verification Date

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 38 – Driver’s Manual

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

Continued Medical Cannabis Education

AL ST 8-27-1 et seq.

Employee Qualifications

AL ST 8-27-1 et seq.

Logging/Record keeping

AL ST 8-27-1 et seq.



AL ST 8-27-1 et seq.

Information recording logs

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Chain of Custody

AL ST 8-27-1 et seq.

Seed to Sale Tracking

AL ST 8-27-1 et seq.

Transport vehicles

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Vehicle surveillance

AL ST 8-27-1 et seq.

Cannabis Transportation

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

Security

AL ST 8-27-1 et seq.

Threat Management

AL ST 8-27-1 et seq.

Incident Response

AL ST 8-27-1 et seq.

Loss and Diversion

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security.  
The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII).  
The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below.  
Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 39 – Quality Control and Quality Assurance Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



39.1 – An overview of the steps to be taken in the manufacturing process to provide high quality products and/or to ensure the safety, potency, stability, lifespan, and consistency among batches of the same product, whether as required by law or otherwise.

AL ST 8-27-1 et seq.

39.2 – Testing

AL ST 8-27-1 et seq.

39.3 – A plan for return and remediation or destruction of any failed test samples, including entry of the event on the Statewide Seed-to-Sale Tracking System.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 40 – Contamination and Recall Plan

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

<u>Julie B. Mitchell</u>	<u>Attorney</u>
Printed Name of Verifying Individual	Title of Verifying Individual
<u>Julie B. Mitchell</u>	<u>12.30.2022</u>
Signature of Verifying Individual	Verification Date

40.1 – Provisions for notifying the originating Processor or Integrated Facility and any other licensee in the chain of custody of an adverse event.

AL ST 8-27-1 et seq.

40.2 – Factors about an adverse event that would likely necessitate a recall, and any potential for retesting or remediation.

AL ST 8-27-1 et seq.

40.3 - Responsible individuals or positions within the Applicant's organization who will oversee the recall process.

AL ST 8-27-1 et seq.

40.4 - Notification protocols to other licensees and the Commission through the Statewide Seed-to-Sale Tracking System.

AL ST 8-27-1 et seq.

40.5 - Processes to ensure that the recalled product is returned, remediated (and approved as safe), or destroyed.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

40.6 – Processes to report to the Commission and any other appropriate regulatory body regarding crisis response and steps taken to mitigate or avoid danger to the public.

AL ST 8-27-1 et seq.

40.7 – Steps to be taken to avoid further contamination, to preserve and protect uncontaminated cannabis or medical cannabis products, and to ensure access to said products by those who depend on it.

AL ST 8-27-1 et seq.

40.8 – Investigation and analysis of the factors that led to the unsafe condition requiring the recall, and any adjustments to internal protocols and processes to avoid recurrence.

AL ST 8-27-1 et seq.



# Exhibit 41 - Marketing and Advertising Plan

## Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

41.1 - Any proposed logos, branding, messaging, or other marketing or advertising communications, either in-house (e.g., in displays or on video monitors installed in the dispensing site) or providing exemplars of any specific advertisements.

See Attachment 1.

41.2 - Any specific media outlets or platforms where the marketing or advertising campaigns or programs will be utilized.

**AL ST 8-27-1 et seq.**

41.3 - The identity of any media outlet or third-party individual or entity who is projected to play any role in the Applicant's marketing or advertising efforts, and copies of all contracts or contract forms proposed for use, if any, between itself and such media outlet or third-party individual or entity.

**AL ST 8-27-1 et seq.**

41.4 - Virtual renderings of all packaging to be provided by the Applicant, demonstrating the size, color, logo, artwork, or statements appearing on the packaging, as well as all child-resistant, tamper-evident, or other safety features, demonstrating conformity with the Act and the AMCC Rules.

**AL ST 8-27-1 et seq.**

AL ST 8-27-1 et seq.

**AL ST 8-27-1 et seq.**

**41.5 – Exemplars of all proposed labeling, including labels on packaging, on containers and any inserts to be included in any packages, demonstrating conformity with the Act and the AMCC Rules.**

See Attachment 2.

# Exhibit 41 - Attachment 1

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date

See below for Applicant logo.

AL ST 8-27-1 et seq.

## Exhibit 41 - Attachment 2

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell  
Signature of Verifying Individual

12.30.2022  
Verification Date



See below for sample labels.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

AL ST 8-27-1 et seq.

All redactions are made in effort to preserve individual privacy and security. The State of Alabama has an interest in protecting Applicants from inappropriate dissemination of Personally Identifiable Information (PII). The Freedom of Information Act ("FOIA") and the US Privacy Act, as well as all relevant AL statutes, are applicable as redacted and noted below. Trade secrets are also protected under the FOIA and AL Trade Secrets Act (AL ST 8-27-1 et seq).

## Exhibit 42 – Website and Social Media

### Verification

The undersigned verifies that the information contained in this exhibit, including any attachments thereto, is accurate and complete, based on the best available information at the date of verification.

Julie B. Mitchell  
Printed Name of Verifying Individual

Attorney  
Title of Verifying Individual

Julie B. Mitchell 12.30.2022  
Signature of Verifying Individual Verification Date

42.1 – A complete site map of each website owned or operated by the Applicant.

AL ST 8-27-1 et seq.

42.2 – The web address of each webpage, social media page, or other online site owned or operated by the Applicant.

AL ST 8-27-1 et seq.

### FORM I: OWNERSHIP ENTITY INDIVIDUALS

"Ownership Entity" – An entity that has any ownership interest in the Applicant.

Complete a separate form for each ownership entity, providing information and verification as to each individual having an indirect or direct ownership interest in the ownership entity. Attach additional forms if necessary.

For purposes of this form, if the ownership entity is a trust, disclose the names and addresses of all trustees and beneficiaries; if a privately held corporation, the names and addresses of all shareholders, officers, and directors; if a publicly held corporation, the names and addresses of all shareholders holding a direct or indirect interest of greater than five percent, officers, and directors; if a partnership or limited liability partnership, the names and addresses of all partners; if a limited partnership or limited liability limited partnership, the names of all partners, both general and limited; or if a limited liability company, the names and addresses of all members and managers.

Alabama Medical Grow LLC  
Business License Applicant Name

Integrated  
License Type

#### Ownership Entity Information

MC Holdings, LLC  
Ownership Entity Name

49%  
Ownership Entity % Ownership in Applicant

Ownership Entity Type:  Trust  Privately Held Corporation  Publicly Held Corporation  
 Partnership  Limited Liability Partnership  Limited Partnership  
 Limited Liability Limited Partnership  Limited Liability Company  
 Other (specify): \_\_\_\_\_

#### Ownership Entity Owners

Thomas Moore owner  
Owner Name Role

FOIA (b)(6)

FOIA (b)(6)

Winston Casear owner  
Owner Name Role

FOIA (b)(6)

FOIA (b)(6)

Owner Name Role % Ownership in Entity

Street Address

City State Zip

Owner Name Role % Ownership in Entity

Street Address

City State Zip

Owner Name Role % Ownership in Entity

Street Address

City State Zip

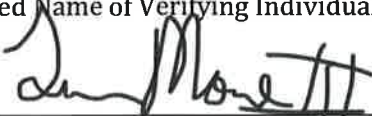
Owner Name Role % Ownership in Entity

Street Address

City State Zip

**Applicant Verification:** The undersigned hereby verifies that the information provided hereinabove (and attached, as necessary) constitutes a complete and accurate list of all individuals with an applicable ownership interest in an ownership entity with an ownership interest in the Applicant.

Thomas Moore  
Printed Name of Verifying Individual

  
Signature of Verifying Individual

Owner  
Title of Verifying Individual

12.29.2022  
Verification Date



**FORM I: OWNERSHIP ENTITY INDIVIDUALS**

*"Ownership Entity" - An entity that has any ownership interest in the Applicant.*

*Complete a separate form for each ownership entity, providing information and verification as to each individual having an indirect or direct ownership interest in the ownership entity. Attach additional forms if necessary.*

*For purposes of this form, if the ownership entity is a trust, disclose the names and addresses of all trustees and beneficiaries; if a privately held corporation, the names and addresses of all shareholders, officers, and directors; if a publicly held corporation, the names and addresses of all shareholders holding a direct or indirect interest of greater than five percent, officers, and directors; if a partnership or limited liability partnership, the names and addresses of all partners; if a limited partnership or limited liability limited partnership, the names of all partners, both general and limited; or if a limited liability company, the names and addresses of all members and managers.*

Alabama Medical Group, LLC  
Business License Applicant Name

Integrated Facility  
License Type

**Ownership Entity Information**

J&L, LLC  
Ownership Entity Name

51%  
Ownership Entity % Ownership in Applicant

- Ownership Entity Type:
- Trust
  - Privately Held Corporation
  - Publicly Held Corporation
  - Partnership
  - Limited Liability Partnership
  - Limited Partnership
  - Limited Liability Limited Partnership
  - Limited Liability Company
  - Other (specify): \_\_\_\_\_

**Ownership Entity Owners**

Judy Wireman  
Owner Name

Owner  
Role

**FOIA (b)(6)**

**FOIA (b)(6)**

Larry Wireman  
Owner Name

Owner  
Role

**FOIA (b)(6)**

**FOIA (b)(6)**

Owner Name \_\_\_\_\_ Role \_\_\_\_\_ % Ownership in Entity \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner Name \_\_\_\_\_ Role \_\_\_\_\_ % Ownership in Entity \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner Name \_\_\_\_\_ Role \_\_\_\_\_ % Ownership in Entity \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner Name \_\_\_\_\_ Role \_\_\_\_\_ % Ownership in Entity \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Applicant Verification:** The undersigned hereby verifies that the information provided hereinabove (and attached, as necessary) constitutes a complete and accurate list of all individuals with an applicable ownership interest in an ownership entity with an ownership interest in the Applicant.

Judy Wireman  
Printed Name of Verifying Individual

Owner  
Title of Verifying Individual

Judy R. Wireman  
Signature of Verifying Individual

12-28-22  
Verification Date

**FOIA(b)(6)**

Good Mornin **FOIA(b)(6)**

As per our conversation, **FOIA(b)(6)** Insurance can provide all the necessary coverages in the state of AL for Medical Cannabis.

Property

Liability

Products

Auto

Director and Officers

Crop (Has to be indoors)

We will send this out to the market for competitive options 120 days out from the effective date. If the effective date is under 120 days we can have our brokers turn a quote around typically within 2 to 3 weeks if all information is obtained. Please do not hesitate to call me with any questions.

Thanks,



Lincoln Allen CIC, CRIS  
Commercial Lines Producer

**FOIA(b)(6)**

**FOIA(b)(6)**

FORM K: Affidavit of Entity Applicant for  
Alabama Medical Cannabis License

STATE OF ALABAMA )  
 )  
Baldwin COUNTY )

Before me, the undersigned notary, did appear the Affiant, who after being by me first duly sworn, did state under oath as follows (please type or print legibly):

1. NAME OF ENTITY APPLYING FOR LICENSE: Alabama Medical Grow, LLC
2. NAME OF AFFIANT: Judy Wireman
3. AFFIANT'S POSITION WITH APPLICANT: Member
4. AFFIANT IS THE APPLICANT'S (Check One):  Responsible Party  Contact Person  
(The affidavit of BOTH individuals is required)
5. TYPE OF LICENSE BEING SOUGHT BY APPLICANT (Check One):  
 Cultivator  Processor  Secure Transporter  
 Dispensary  Integrated Facility  State Testing Laboratory

6. On behalf of the Applicant, I do hereby affirm under oath as follows:

- a. I, the undersigned Affiant named in paragraph 2 above, am an adult, over the age of 19 years and competent to provide this Affidavit.  
JRW INITIAL HERE
- b. In my position stated in paragraph 3 above, I have been duly authorized by the Applicant identified in paragraph 1 above (hereinafter, "Applicant") to provide this Affidavit.  
(Attach a copy of the entity applicant's written authorization to this Affidavit.)  
JRW INITIAL HERE
- c. I understand and acknowledge that this Affidavit and the statements, information and documents or other exhibits accompanying it, are for the purpose of seeking one (1) license of the type specified in paragraph 5 above, on behalf of the Applicant. Neither I nor the Applicant are seeking a different Alabama Medical Cannabis license on behalf of any individual or any other entity.  
JRW INITIAL HERE
- d. That all statements, information, documents and other exhibits provided in the Application are true and correct, based on my own personal knowledge and a diligent investigation by me. To the extent any information provided therein was heretofore outside my personal knowledge or ability to affirm, I have personally communicated with those within the Applicant's business who have such personal knowledge, whose duties



include knowledge of the facts stated and/or the integrity of the documents or other exhibits, and I am able, based on such communications, to attest to their currentness and accuracy. This I and the Applicant affirm under penalty of perjury and other applicable sanctions under the AMCC Rules and Alabama law.

JRW INITIAL HERE

- e. Applicant understands and acknowledges that the license being applied for is a revocable privilege granted by this state and is not a property right, and that this Application likewise does not convey to, or otherwise entitle unto, the Applicant any rights to a license.

JRW INITIAL HERE

- f. Applicant understands, acknowledges, and will continue to respect and comply with AMCC Rules regarding limited communication during the Application process.

JRW INITIAL HERE

- g. Applicant consents to all background checks, examinations, inspections, and search and seizure by AMCC and law enforcement personnel during this Application process and afterward, to the extent a license is awarded.

JRW INITIAL HERE

- h. Applicant has no economic interest, as defined in the AMCC Rules, in any other license or Application for license under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et seq., Code of Alabama 1975.

JRW INITIAL HERE

- i. I and the Applicant will at all times, to the best of our ability, comply with the AMCC Rules, and cooperate and maintain transparency with the AMCC, its staff and other agents.

JRW INITIAL HERE

- j. Any verification provided in the Application is hereby affirmed under oath to be true and correct as of the date of the Application's submission.

JRW INITIAL HERE

Paul R. Wuerman

Signature of Affiant  
Acting for and on behalf of:

Alabama Medical Grow, LLC

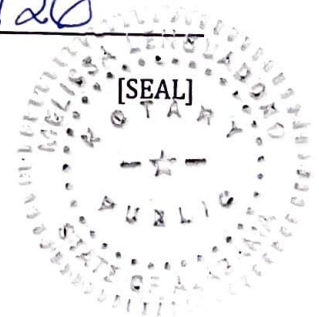
Applicant

Sworn to and subscribed before me on this 28 day of December, 2027

Melissa Perquado

Notary Public

My Commission Expires: 07/20



FORM K: Affidavit of Entity Applicant for  
Alabama Medical Cannabis License

STATE OF ALABAMA )  
 )  
Baldwin COUNTY )

Before me, the undersigned notary, did appear the Affiant, who after being by me first duly sworn, did state under oath as follows (please type or print legibly):

1. NAME OF ENTITY APPLYING FOR LICENSE: Alabama Medical Grow, LLC

2. NAME OF AFFIANT: Larry Wireman

3. AFFIANT'S POSITION WITH APPLICANT: Member

4. AFFIANT IS THE APPLICANT'S (Check One):  Responsible Party  Contact Person  
(The affidavit of BOTH individuals is required)

5. TYPE OF LICENSE BEING SOUGHT BY APPLICANT (Check One):

Cultivator  Processor  Secure Transporter  
 Dispensary  Integrated Facility  State Testing Laboratory

6. On behalf of the Applicant, I do hereby affirm under oath as follows:

a. I, the undersigned Affiant named in paragraph 2 above, am an adult, over the age of 19 years and competent to provide this Affidavit.

W INITIAL HERE

b. In my position stated in paragraph 3 above, I have been duly authorized by the Applicant identified in paragraph 1 above (hereinafter, "Applicant") to provide this Affidavit.

(Attach a copy of the entity applicant's written authorization to this Affidavit.)

W INITIAL HERE

c. I understand and acknowledge that this Affidavit and the statements, information and documents or other exhibits accompanying it, are for the purpose of seeking one (1) license of the type specified in paragraph 5 above, on behalf of the Applicant. Neither I nor the Applicant are seeking a different Alabama Medical Cannabis license on behalf of any individual or any other entity.

W INITIAL HERE

d. That all statements, information, documents and other exhibits provided in the Application are true and correct, based on my own personal knowledge and a diligent investigation by me. To the extent any information provided therein was heretofore outside my personal knowledge or ability to affirm, I have personally communicated with those within the Applicant's business who have such personal knowledge, whose duties



include knowledge of the facts stated and/or the integrity of the documents or other exhibits, and I am able, based on such communications, to attest to their currentness and accuracy. This I and the Applicant affirm under penalty of perjury and other applicable sanctions under the AMCC Rules and Alabama law.

W INITIAL HERE

- e. Applicant understands and acknowledges that the license being applied for is a revocable privilege granted by this state and is not a property right, and that this Application likewise does not convey to, or otherwise entitle unto, the Applicant any rights to a license.

W INITIAL HERE

- f. Applicant understands, acknowledges, and will continue to respect and comply with AMCC Rules regarding limited communication during the Application process.

W INITIAL HERE

- g. Applicant consents to all background checks, examinations, inspections, and search and seizure by AMCC and law enforcement personnel during this Application process and afterward, to the extent a license is awarded.

W INITIAL HERE

- h. Applicant has no economic interest, as defined in the AMCC Rules, in any other license or Application for license under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et seq., Code of Alabama 1975.

W INITIAL HERE

- i. I and the Applicant will at all times, to the best of our ability, comply with the AMCC Rules, and cooperate and maintain transparency with the AMCC, its staff and other agents.

W INITIAL HERE

- j. Any verification provided in the Application is hereby affirmed under oath to be true and correct as of the date of the Application's submission.

W INITIAL HERE

Jerry W. -

Signature of Affiant

Acting for and on behalf of:

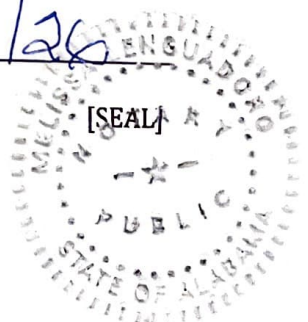
Alabama Medical Grow, LLC

Applicant

Sworn to and subscribed before me on this 28 day of December, 2024

Melissa Longobardi  
Notary Public

My Commission Expires: 07/26



**FORM K: Affidavit of Entity Applicant for  
Alabama Medical Cannabis License**

STATE OF ALABAMA                    )  
  )  
\_\_\_\_\_ COUNTY                    )

Before me, the undersigned notary, did appear the Affiant, who after being by me first duly sworn, did state under oath as follows (please type or print legibly):

1. NAME OF ENTITY APPLYING FOR LICENSE: Alabama Medical Grow
2. NAME OF AFFIANT: TOM MOORE
3. AFFIANT'S POSITION WITH APPLICANT: \_\_\_\_\_
4. AFFIANT IS THE APPLICANT'S (Check One):      Responsible Party      Contact Person  
**(The affidavit of BOTH individuals is required)**
5. TYPE OF LICENSE BEING SOUGHT BY APPLICANT (Check One):  
 Cultivator            Processor            Secure Transporter  
 Dispensary            Integrated Facility      State Testing Laboratory

6. On behalf of the Applicant, I do hereby affirm under oath as follows:
  - a. I, the undersigned Affiant named in paragraph 2 above, am an adult, over the age of 19 years and competent to provide this Affidavit.  
TM INITIAL HERE
  - b. In my position stated in paragraph 3 above, I have been duly authorized by the Applicant identified in paragraph 1 above (hereinafter, "Applicant") to provide this Affidavit.  
**(Attach a copy of the entity applicant's written authorization to this Affidavit.)**  
TM INITIAL HERE
  - c. I understand and acknowledge that this Affidavit and the statements, information and documents or other exhibits accompanying it, are for the purpose of seeking one (1) license of the type specified in paragraph 5 above, on behalf of the Applicant. Neither I nor the Applicant are seeking a different Alabama Medical Cannabis license on behalf of any individual or any other entity.  
TM INITIAL HERE
  - d. That all statements, information, documents and other exhibits provided in the Application are true and correct, based on my own personal knowledge and a diligent investigation by me. To the extent any information provided therein was heretofore outside my personal knowledge or ability to affirm, I have personally communicated with those within the Applicant's business who have such personal knowledge, whose duties



include knowledge of the facts stated and/or the integrity of the documents or other exhibits, and I am able, based on such communications, to attest to their currentness and accuracy. This I and the Applicant affirm under penalty of perjury and other applicable sanctions under the AMCC Rules and Alabama law.

TM INITIAL HERE

- e. Applicant understands and acknowledges that the license being applied for is a revocable privilege granted by this state and is not a property right, and that this Application likewise does not convey to, or otherwise entitle unto, the Applicant any rights to a license.

TM INITIAL HERE

- f. Applicant understands, acknowledges, and will continue to respect and comply with AMCC Rules regarding limited communication during the Application process.

TM INITIAL HERE

- g. Applicant consents to all background checks, examinations, inspections, and search and seizure by AMCC and law enforcement personnel during this Application process and afterward, to the extent a license is awarded.

TM INITIAL HERE

- h. Applicant has no economic interest, as defined in the AMCC Rules, in any other license or Application for license under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et seq., Code of Alabama 1975.

TM INITIAL HERE

- i. I and the Applicant will at all times, to the best of our ability, comply with the AMCC Rules, and cooperate and maintain transparency with the AMCC, its staff and other agents.

TM INITIAL HERE

- j. Any verification provided in the Application is hereby affirmed under oath to be true and correct as of the date of the Application's submission.

TM INITIAL HERE

[Signature]  
Signature of Affiant  
Acting for and on behalf of:

\_\_\_\_\_  
Applicant

Sworn to and subscribed before me on this 30<sup>th</sup> day of December, 2022

[Signature]  
Notary Public

My Commission Expires: June 1, 2026

[SEAL]



**FORM K: Affidavit of Entity Applicant for  
Alabama Medical Cannabis License**

Mississippi  
STATE OF ~~ALABAMA~~ )  
 )  
Madison COUNTY )

Before me, the undersigned notary, did appear the Affiant, who after being by me first duly sworn, did state under oath as follows (please type or print legibly):

1. NAME OF ENTITY APPLYING FOR LICENSE: Alabama Medical Grow LLC
2. NAME OF AFFIANT: Julie B. Mitchell
3. AFFIANT'S POSITION WITH APPLICANT: Attorney
4. AFFIANT IS THE APPLICANT'S (Check One):       Responsible Party       Contact Person  
**(The affidavit of BOTH individuals is required)**

5. TYPE OF LICENSE BEING SOUGHT BY APPLICANT (Check One):

- Cultivator       Processor       Secure Transporter  
 Dispensary       Integrated Facility       State Testing Laboratory

6. On behalf of the Applicant, I do hereby affirm under oath as follows:

- a. I, the undersigned Affiant named in paragraph 2 above, am an adult, over the age of 19 years and competent to provide this Affidavit.

JBM INITIAL HERE

- b. In my position stated in paragraph 3 above, I have been duly authorized by the Applicant identified in paragraph 1 above (hereinafter, "Applicant") to provide this Affidavit.

**(Attach a copy of the entity applicant's written authorization to this Affidavit.)**

JBM INITIAL HERE

- c. I understand and acknowledge that this Affidavit and the statements, information and documents or other exhibits accompanying it, are for the purpose of seeking one (1) license of the type specified in paragraph 5 above, on behalf of the Applicant. Neither I nor the Applicant are seeking a different Alabama Medical Cannabis license on behalf of any individual or any other entity.

JBM INITIAL HERE

- d. That all statements, information, documents and other exhibits provided in the Application are true and correct, based on my own personal knowledge and a diligent investigation by me. To the extent any information provided therein was heretofore outside my personal knowledge or ability to affirm, I have personally communicated with those within the Applicant's business who have such personal knowledge, whose duties

include knowledge of the facts stated and/or the integrity of the documents or other exhibits, and I am able, based on such communications, to attest to their currentness and accuracy. This I and the Applicant affirm under penalty of perjury and other applicable sanctions under the AMCC Rules and Alabama law.

JMM INITIAL HERE

e. Applicant understands and acknowledges that the license being applied for is a revocable privilege granted by this state and is not a property right, and that this Application likewise does not convey to, or otherwise entitle unto, the Applicant any rights to a license

JMM INITIAL HERE

f. Applicant understands, acknowledges, and will continue to respect and comply with AMCC Rules regarding limited communication during the Application process.

JMM INITIAL HERE

g. Applicant consents to all background checks, examinations, inspections, and search and seizure by AMCC and law enforcement personnel during this Application process and afterward, to the extent a license is awarded.

JMM INITIAL HERE

h. Applicant has no economic interest, as defined in the AMCC Rules, in any other license or Application for license under the Darren Wesley "Ato" Hall Compassion Act, § 20-2A-1, et seq. Code of Alabama 1975.

JMM INITIAL HERE

i. I and the Applicant will at all times, to the best of our ability, comply with the AMCC Rules, and cooperate and maintain transparency with the AMCC, its staff and other agents.

JMM INITIAL HERE

j. Any verification provided in the Application is hereby affirmed under oath to be true and correct as of the date of the Application's submission.

JMM INITIAL HERE

Julie B. Mitchell

Signature of Affiant  
Acting for and on behalf of:

Julie B. Mitchell  
Applicant

Sworn to and subscribed before me on this 30 day of DECEMBER, 2022

[Signature]  
Notary Public

My Commission Expires: 9.8.23

