IN THE SUPREME COURT OF THE STATE OF NEVADA

Supreme Court Case No. 82014

IN RE: D.O.T. LITIGATION

Electronically Filed
Sep 29 2022 07:49 p.m.
Elizabeth A. Brown
Clerk of Supreme Court

TGIG, LLC; NEVADA HOLISTIC MEDICINE, LLC; GBS NEVADA PARTNERS, LLC; FIDELIS HOLDINGS, LLC; GRAVITAS NEVADA, LLC; NEVADA PURE, LLC; MEDIFARM, LLC; MEDIFARM IV LLC; THC NEVADA, LLC; HERBAL CHOICE, INC.; RED EARTH LLC; NEVCANN LLC, GREEN THERAPEUTICS LLC; AND GREEN LEAF FARMS HOLDINGS LLC,

Appellants,

v.

THE STATE OF NEVADA DEPARTMENT OF TAXATION; INTEGRAL ASSOCIATES, LLC D/B/A ESSENCE CANNABIS DISPENSARIES; ESSENCE TROPICANA, LLC; AND ESSENCE HENDERSON, LLC

Respondents.

THE ESSENCE ENTITIES' SUPPLEMENTAL APPENDIX
VOLUME 7 OF 16

On appeal from the Eighth Judicial District Court, Clark County
The Honorable Elizabeth Gonzalez, Department XI
District Court Case No. A-19-787004-B and Consolidated Cases.

Todd L. Bice, Esq., Bar No. 4534
Jordan T. Smith, Esq., Bar No. 12097
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Attorneys for Respondent Essence Entities

Docket 82014 Document 2022-30771

ALPHABETICAL INDEX TO THE ESSENCE ENTITIES' SUPPLEMENTAL APPENDIX

Document	Date	Vol.	Page Nos.
Applications (Redacted)	09/2018	1-16	SA000001-3829
Business Court Order Scheduling a Supplemental Rule 16 Conference	09/21/2020	16	SA003924-3928
Business Court Scheduling and Trial Order	10/27/2020	16	SA003929-3933
Court Minute Order regarding All Pending Motions	03/19/2020	16	SA003871-3874
Court Minute Order regarding Motion for Summary Judgment	05/15/2020	16	SA003888-3891
Essence Entities' Brief in Support of Judgment on Partial Findings	08/10/2020	16	SA003892-3896
Essence Entities' Motion for Summary Judgment	03/27/2020	16	SA003875-3887
Essence Entities' Closing Power Point Presentation	08/17/2020	16	SA003897-3923
Order Granting Integral's Motion to Intervene	04/22/2019	16	SA003852-3857
Order Granting Joint Motion to Consolidate	12/06/2019	16	SA003858-3869
Order Granting Motion to Certify	08/04/2022	16	SA003934-3954
Order Granting Plaintiffs Leave to File Amended Complaints	12/31/2019	16	SA003870
Plaintiff's Trial Exhibit 1142 – Applications Spreadsheet	09/2018	16	SA003830-3851

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No.	Document	Date	Vol.	Page Nos.
1.	Applications (Redacted)	09/2018	1-16	SA000001-3829
2.	Plaintiff's Trial Exhibit 1142 – Applications Spreadsheet	09/2018	16	SA003830-3851
3.	Order Granting Integral's Motion to Intervene	04/22/2019	16	SA003852-3857
4.	Order Granting Joint Motion to Consolidate	12/06/2019	16	SA003858-3869
5.	Order Granting Plaintiffs Leave to File Amended Complaints	12/31/2019	16	SA003870
6.	Court Minute Order regarding All Pending Motions	03/19/2020	16	SA003871-3874
7.	Essence Entities' Motion for Summary Judgment	03/27/2020	16	SA003875-3887
8.	Court Minute Order regarding Motion for Summary Judgment	05/15/2020	16	SA003888-3891
9.	Essence Entities' Brief in Support of Judgment on Partial Findings	08/10/2020	16	SA003892-3896
10.	Essence Entities' Closing Power Point Presentation	08/17/2020	16	SA003897-3923
11.	Business Court Order Scheduling a Supplemental Rule 16 Conference	09/21/2020	16	SA003924-3928
12.	Business Court Scheduling and Trial Order	10/27/2020	16	SA003929-3933
13.	Order Granting Motion to Certify	08/04/2022	16	SA003934-3954

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that I am an employee of Pisanelli Bice PLLC, and pursuant to NRAP 25(b) and NEFR 9(d), that on this 29th day of September, 2022, I electronically filed and served the foregoing **THE ESSENCE ENTITIES' SUPPLEMENTAL APPENDIX** with the Clerk of the Court for the Nevada Supreme Court by using the Nevada Supreme Courts E-Filing system (Eflex), to all participants in the case who are registered with Eflex system.

/s/ Shannon Dinkel
An employee of PISANELLI BICE PLLC

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Secretary of State List ManorMem
Revised: 7-1-17

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

On Demand Promissory Note

Amount $ 2,500,000.00 Date September 19, 2018

For value received, James Cavanaugh Dillingham (the borrower), on June 8, 2016 promises to pay in full to the order of Patricia Cavanaugh Dillingham (the lender), in 60 monthly installments at an interest rate of 12%, amortized over 60 months.

Terms of Repayment

A. Payment. Loan to be paid in 60 monthly installments of commencing on 30 days after License or Licenses issued TBD. In the occurrence that License is issued after 2019 payment will commence on February 1st, 2019.

B. Total amount to be paid back is $ 2,800,000.00 Principle of $2,500,000.00 and interest of $300,000.00.

Prepayment

The borrower reserves the right to prepay this note (in whole or in part) prior to the due date with no prepayment penalty.

Collection Costs

If any payment obligation under this note is not paid when due, the Borrower promises to pay all costs of collection, including reasonable attorneys fees, whether or not a lawsuit is commenced as part of the collection process.

Default

If any of the following events of default occur, this note and any other obligations to the borrower or the lender, shall become due and payable.

1. The failure of borrower to pay the principal and any accrued interest when due.
2. The liquidation, dissolution, incompetency or death of the borrower or lender.
3. The filing of Bankruptcy proceedings involving the borrower as a debtor.
4. The insolvency of the borrower.
5. A misrepresentation by the borrower to the lender for the purposes of extending credit.

Governing Law

This note shall be construed in accordance with the laws of the state of Nevada.

In witness Whereof, this agreement has been executed and delivered in the in the manner prescribed by law as of the date first written above.

Borrower:

By: James C. Dillingham James Cavanaugh Dillingham

Lender:
BY: P C Dillingham Patricia Cavanaugh Dillingham

WELLS FARGO

Portfolio By Wells Fargo Private Bank

Questions? Please contact us:

The Private Bank Service Team
Available 24 hours a day, 7 days a week
Telecommunications Relay Services calls accepted
Phone: **1-877-646-8560** , *TTY:* 1-800-600-4833

Online: wellsfargo.com

Write: Wells Fargo Private Bank
P.O. Box 4056
Concord, CA 94524-4056

PATRICIA C DILLINGHAM

[redacted]

August 31, 2018

Total assets: **$2,501,064.53**

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Private Bank Interest Checking

Primary Checking account in your Portfolio by Wells Fargo Private Bank relationship

Activity summary

[redacted]

Balance on 8/31	$2,501,064.53

Account number: **57003469**

PATRICIA C DILLINGHAM

[redacted]

[redacted]

1190

On Demand Promissory Note

Amount $ 1,200,000.00 Date September 18, 2018

For value received, James Cavanaugh Dillingham (the borrower), on September 18, 2018 promises to pay in full to the order of William O. Dillingham III (the lender), in 120 monthly installments at an interest rate of 9%, amortized over 120 months.

Terms of Repayment

A. **Payment.** Loan to be paid in 120 monthly installments of commencing on January 1st, 2019.

B. **Total amount to be paid back is $1,308,000.00** Principle of $1,200,000.00 and interest of $108,000.00.

Prepayment

The borrower reserves the right to prepay this note (in whole or in part) prior to the due date with no prepayment penalty.

Collection Costs

If any payment obligation under this note is not paid when due, the Borrower promises to pay all costs of collection, including reasonable attorneys fees, whether or not a lawsuit is commenced as part of the collection process.

Default

If any of the following events of default occur, this note and any other obligations to the borrower or the lender, shall become due and payable.

1. The failure of borrower to pay the principal and any accrued interest when due.
2. The liquidation, dissolution, incompetency or death of the borrower or lender.
3. The filing of Bankruptcy proceedings involving the borrower as a debtor.
4. The insolvency of the borrower.
5. A misrepresentation by the borrower to the lender for the purposes of extending credit.

Governing Law

This note shall be construed in accordance with the laws of the state of Nevada.

In witness Whereof, this agreement has been executed and delivered in the in the manner prescribed by law as of the date first written above.

Borrower:

By: _____ JAMES Cavanaugh Dillingham

Lender:

By: _____ William O. Dillingham III

WELLS FARGO ADVISORS

SNAPSHOT [redacted]

WILLIAM DILLINGHAM III

AUGUST 1, 2018 - AUGUST 31, 2018
ACCOUNT NUMBER 1364-0494

Progress summary

	THIS PERIOD	THIS YEAR
[redacted]		
Closing value	**$1,255,874.39**	**$1,255,874.39**

As a Wells Fargo Advisors client, you can upgrade your investment a
Brokerage Cash Services at no additional cost. Brokerage Cash Services p
to convenient money movement options including mobile deposit services.
teller deposit services at Wells Fargo branch locations which are provided th
purpose Bank account. You'll have access to many more features and bene
manage your finances. It's as simple as talking with Your Financial Advis
today about Brokerage Cash Services.

Portfolio summary

	ASSET TYPE	PREVIOUS VALUE ON JUL 31	%	CURRENT VALUE ON AUG 31	%	E AN
ASSETS	[redacted]					
	Asset value	**$1,249,282.13**	**100%**	**$1,255,874.39**	**100%**	

 # Certain assets in this category may not be held in your account. None of the positions are protected by SIPC. If you no longer own any of th
investments, please tell us so we can update this section. For important additional information please refer to the disclosures contained in this statem

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
2070 Sales Taxes Payable				(3,054.66)			
01/31/13	99		To Record Sales Journal		7.35		
01/31/13	99		To Record Sales Journal			2,939.04	
01/31/13	4131		Nv Department of Taxation		3,054.66		
			Totals for 01/31/13		3,062.01	2,939.04	(2,931.69)
02/28/13	99		To Record Sales Journal		6.95		
02/28/13	99		To Record Sales Journal			2,780.41	
02/28/13	4200		Nv Department of Taxation		2,931.69		
			Totals for 02/28/13		2,938.64	2,780.41	(2,773.46)
03/31/13	99		To Record Sales Journal		9.95		
03/31/13	99		To Record Sales Journal			3,979.13	
03/31/13	4310		Nv Department of Taxation		2,773.46		
			Totals for 03/31/13		2,783.41	3,979.13	(3,969.18)
04/29/13	4390		Nv Department of Taxation		3,969.18		
04/30/13	99		To Record Sales Journal		8.95		
04/30/13	99		To Record Sales Journal			3,580.30	
			Totals for 04/30/13		3,978.13	3,580.30	(3,571.35)
05/30/13	4469		Nv Department of Taxation		3,571.35		
05/31/13	99		To Record Sales Journal		9.12		
05/31/13	99		To Record Sales Journal			3,649.78	
			Totals for 05/31/13		3,580.47	3,649.78	(3,640.66)
06/30/13	99		To Record Sales Journal		9.45		
06/30/13	99		To Record Sales Journal			3,778.73	
			Totals for 06/30/13		9.45	3,778.73	(7,409.94)
07/01/13	4543		Nv Department of Taxation		3,640.66		
07/31/13	99		To Record Sales Journal		10.01		
07/31/13	99		To Record Sales Journal			4,004.41	
07/31/13	4628		Nv Department of Taxation		3,769.28		
			Totals for 07/31/13		7,419.95	4,004.41	(3,994.40)
08/31/13	99		To Record Sales Journal		10.42		
08/31/13	99		To Record Sales Journal			4,168.08	
08/31/13	4727		Nv Department of Taxation		4,004.40		
			Totals for 08/31/13		4,014.82	4,168.08	(4,147.66)
09/30/13	99		To Record Sales Journal		8.80		
09/30/13	99		To Record Sales Journal			3,520.38	
			Totals for 09/30/13		8.80	3,520.38	(7,659.24)
10/01/13	4800		Nv Department of Taxation		4,521.10		
10/31/13	99		To Record Sales Journal		8.46		
10/31/13	99		To Record Sales Journal			3,385.06	
			Totals for 10/31/13		4,529.56	3,385.06	(6,514.74)
11/01/13	4890		Nv Department of Taxation		3,385.06		
11/30/13	99		To Record Sales Journal		7.20		
11/30/13	99		To Record Sales Journal			2,879.03	
			Totals for 11/30/13		3,392.26	2,879.03	(6,001.51)
12/02/13	4950		Nv Department of Taxation		3,484.13		
12/31/13	25		Adj Sales Taxes At 12/31/13		2,510.54		
12/31/13	99		To Record Sales Journal		6.84		

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
12/31/13	99		To Record Sales Journal			2,735.93	
			Totals for 12/31/13		6,001.51	2,735.93	(2,735.93)
01/31/14	99		To Record Sales Journal		5.79		
01/31/14	99		To Record Sales Journal			2,316.62	
01/31/14	5083		Nv Department of Taxation		2,735.98		
			Totals for 01/31/14		2,741.77	2,316.62	(2,310.78)
02/28/14	99		To Record Sales Journal		5.85		
02/28/14	99		To Record Sales Journal			2,338.21	
			Totals for 02/28/14		5.85	2,338.21	(4,643.14)
03/04/14	5151		Nv Department of Taxation		2,495.96		
03/31/14	99		To Record Sales Journal		5.92		
03/31/14	99		To Record Sales Journal			2,366.92	
			Totals for 03/31/14		2,501.88	2,366.92	(4,508.18)
04/01/14	5222		Nv Department of Taxation		2,338.21		
04/30/14	99		To Record Sales Journal		6.35		
04/30/14	99		To Record Sales Journal			2,539.18	
			Totals for 04/30/14		2,344.56	2,539.18	(4,702.80)
05/01/14	5306		Nv Department of Taxation		2,558.33		
05/31/14	99		To Record Sales Journal		6.93		
05/31/14	99		To Record Sales Journal			2,771.43	
			Totals for 05/31/14		2,565.26	2,771.43	(4,908.97)
06/01/14	5395		Nv Department of Taxation		2,538.82		
06/30/14	99		To Record Sales Journal		7.57		
06/30/14	99		To Record Sales Journal			3,029.41	
			Totals for 06/30/14		2,546.39	3,029.41	(5,391.99)
07/01/14	5489		Nv Department of Taxation		2,675.13		
07/31/14	99		To Record Sales Journal		7.49		
07/31/14	99		To Record Sales Journal			2,996.66	
			Totals for 07/31/14		2,682.62	2,996.66	(5,706.03)
08/01/14	5583		Nv Department of Taxation		2,918.70		
08/31/14	99		To Record Sales Journal		7.27		
08/31/14	99		To Record Sales Journal			2,906.47	
			Totals for 08/31/14		2,925.97	2,906.47	(5,686.53)
09/01/14	5671		Nv Department of Taxation		2,996.66		
09/01/14	5691		Nv Department of Taxation		2,644.90		
09/30/14	99		To Record Bank Deposits #1177		6.95		
09/30/14	99		To Record Bank Deposits #1177			2,781.16	
			Totals for 09/30/14		5,648.51	2,781.16	(2,819.18)
10/02/14	5740		Nv Department of Taxation		2,359.34		
10/26/14	5777		Nv Department of Taxation		64.89		
10/31/14	99		To Record Bank Deposits #1177		7.64		
10/31/14	99		To Record Bank Deposits #1177			3,056.77	
			Totals for 10/31/14		2,431.87	3,056.77	(3,444.08)
11/03/14	5786		Nv Department of Taxation		2,774.21		
11/30/14	99		To Record Bank Deposits #1177		6.69		
11/30/14	99		To Record Bank Deposits #1177			2,677.17	
11/30/14	5823		Nv Department of Taxation		3,049.13		

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
			Totals for 11/30/14		5,830.03	2,677.17	(291.22)
12/23/14	5858		Nv Department of Taxation		2,670.48		
12/31/14	25		Adj Sales Taxes Payable At 12/31/14			2,323.24	
12/31/14	99		To Record Bank Deposits #1177		6.67		
12/31/14	99		To Record Bank Deposits #1177			2,666.25	
			Totals for 12/31/14		2,677.15	4,989.49	(2,603.56)
01/31/15	99		To Record Bank Deposits #1177		6.53		
01/31/15	99		To Record Bank Deposits #1177			2,610.09	
			Totals for 01/31/15		6.53	2,610.09	(5,207.12)
02/27/15	5961		Nv Department of Taxation		2,603.56		
02/28/15	99		To Record Sales Journal		6.61		
02/28/15	99		To Record Sales Journal			2,643.67	
			Totals for 02/28/15		2,610.17	2,643.67	(5,240.62)
03/31/15	99		To Record Sales Journal		7.48		
03/31/15	99		To Record Sales Journal			2,995.95	
			Totals for 03/31/15		7.48	2,995.95	(8,229.09)
04/08/15	6030		Nv Department of Taxation		2,637.06		
04/27/15	6059		Nv Department of Taxation		2,988.46		
04/30/15	99		To Record Sales Journal		7.00		
04/30/15	99		To Record Sales Journal			2,800.90	
			Totals for 04/30/15		5,632.52	2,800.90	(5,397.47)
05/25/15	6097		Nv Department of Taxation		2,793.90		
05/31/15	99		To Record Sales Journal		7.79		
05/31/15	99		To Record Sales Journal			3,117.38	
			Totals for 05/31/15		2,801.69	3,117.38	(5,713.16)
06/25/15	6138		Nv Department of Taxation		3,109.59		
06/30/15	99		To Record Sales Journal		7.38		
06/30/15	99		To Record Sales Journal			2,951.85	
			Totals for 06/30/15		3,116.97	2,951.85	(5,548.04)
07/27/15	6175		Nv Department of Taxation		2,944.47		
07/31/15	99		To Record Sales Journal		8.35		
07/31/15	99		To Record Sales Journal			3,338.54	
			Totals for 07/31/15		2,952.82	3,338.54	(5,933.76)
08/16/15	6210		Nv Department of Taxation		3,330.19		
08/31/15	99		To Record Sales Journal		7.40		
08/31/15	99		To Record Sales Journal			2,959.88	
			Totals for 08/31/15		3,337.59	2,959.88	(5,556.05)
09/10/15	6242		Nv Department of Taxation		2,952.48		
09/30/15	99		To Record Sales Journal		7.21		
09/30/15	99		To Record Sales Journal			2,884.29	
			Totals for 09/30/15		2,959.69	2,884.29	(5,480.65)
10/31/15	99		To Record Sales Journal		6.87		
10/31/15	99		To Record Sales Journal			2,747.39	
			Totals for 10/31/15		6.87	2,747.39	(8,221.17)
11/30/15	99		To Record Sales Journal		5.75		
11/30/15	99		To Record Sales Journal			2,299.96	

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
11/30/15	6359		Nv Department of Taxation		3,132.58		
			Totals for 11/30/15		3,138.33	2,299.96	(7,382.80)
12/31/15	22		Adj Sales Taxes Pay		5,088.59		
12/31/15	99		To Record Sales Journal		7.52		
12/31/15	99		To Record Sales Journal			3,006.67	
12/31/15	6426		Nv Department of Taxation		2,294.21		
			Totals for 12/31/15		7,390.32	3,006.67	(2,999.15)
01/30/16	6489		Nv Department of Taxation		2,999.15		
01/31/16	99		To Record Sales Journal		8.87		
01/31/16	99		To Record Sales Journal			3,547.89	
			Totals for 01/31/16		3,008.02	3,547.89	(3,539.02)
02/28/16	6560		Nv Department of Taxation		3,539.02		
02/29/16	99		To Record Sales Journal		9.63		
02/29/16	99		To Record Sales Journal			3,850.56	
			Totals for 02/29/16		3,548.65	3,850.56	(3,840.93)
03/31/16	99		To Record Sales Journal		10.59		
03/31/16	99		To Record Sales Journal			4,234.39	
03/31/16	6643		Nv Department of Taxation		3,840.93		
			Totals for 03/31/16		3,851.52	4,234.39	(4,223.80)
04/30/16	99		To Record Sales Journal		10.73		
04/30/16	99		To Record Sales Journal			4,293.64	
			Totals for 04/30/16		10.73	4,293.64	(8,506.71)
05/01/16	6718		Nv Department of Taxation		4,223.80		
05/26/16	101		Nv Department of Taxation		4,282.91		
05/31/16	99		To Record Sales Journal		10.95		
05/31/16	99		To Record Sales Journal			4,379.07	
			Totals for 05/31/16		8,517.66	4,379.07	(4,368.12)
06/01/16	60007		Nv Department of Taxation		4,282.91		
06/30/16	99		To Record Sales Journal		9.98		
06/30/16	99		To Record Sales Journal			3,991.99	
			Totals for 06/30/16		4,292.89	3,991.99	(4,067.22)
07/10/16	6824		Nv Department of Taxation		3,982.01		
07/31/16	99		To Record Sales Journal		12.07		
07/31/16	99		To Record Sales Journal			4,827.27	
			Totals for 07/31/16		3,994.08	4,827.27	(4,900.41)
08/10/16	6883		Nv Department of Taxation		4,815.20		
08/31/16	99		To Record Sales Journal		11.14		
08/31/16	99		To Record Sales Journal			4,457.62	
			Totals for 08/31/16		4,826.34	4,457.62	(4,531.69)
09/02/16	6951		Nv Department of Taxation		4,446.48		
09/30/16	99		Record Sales Journal		11.45		
09/30/16	99		Record Sales Journal			4,580.20	
			Totals for 09/30/16		4,457.93	4,580.20	(4,653.96)
10/10/16	7014		Nv Department of Taxation		4,568.75		
10/31/16	99		Record Sales Journal		11.78		
10/31/16	99		Record Sales Journal			4,711.23	
			Totals for 10/31/16		4,580.53	4,711.23	(4,784.66)

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
11/10/16	7069		Nv Department of Taxation		4,699.45		
11/30/16	99		Record Sales Journal		10.73		
11/30/16	99		Record Sales Journal			4,290.79	
			Totals for 11/30/16		4,710.18	4,290.79	(4,365.27)
12/05/16	7125		Nv Department of Taxation		4,280.06		
12/31/16	28		Adj Sales Taxes Pay At 12/31/16		85.21		
12/31/16	99		Record Sales Journal		11.10		
12/31/16	99		Record Sales Journal			4,439.84	
			Totals for 12/31/16		4,376.37	4,439.84	(4,428.74)
01/10/17	7177		Nevada Department of Taxation		4,428.74		
01/31/17	99		Record Sales Journal		9.61		
01/31/17	99		Record Sales Journal			3,842.31	
			Totals for 01/31/17		4,438.35	3,842.31	(3,832.70)
02/10/17	7236		Nevada Department of Taxation		3,832.70		
02/28/17	99		Record Sales Journal		10.00		
02/28/17	99		Record Sales Journal			3,998.57	
			Totals for 02/28/17		3,842.70	3,998.57	(3,988.57)
03/10/17	7293		Nevada Department of Taxation		3,988.57		
03/31/17	99		Record Sales Journal		10.90		
03/31/17	99		Record Sales Journal			4,358.35	
			Totals for 03/31/17		3,999.47	4,358.35	(4,347.45)
04/10/17	7346		Nevada Department of Taxation		4,347.45		
04/30/17	11		Adjust Sales Tax		85.21		
04/30/17	99		Record Sales Journal		11.71		
04/30/17	99		Record Sales Journal			4,684.38	
			Totals for 04/30/17		4,444.37	4,684.38	(4,587.46)
05/10/17	7405		Nevada Department of Taxation		4,672.67		
05/31/17	99		Record Sales Journal		13.14		
05/31/17	99		Record Sales Journal			5,257.67	
			Totals for 05/31/17		4,685.81	5,257.67	(5,159.32)
06/10/17	7452		Nevada Department of Taxation		5,244.53		
06/30/17	99		Record Sales Journal		11.70		
06/30/17	99		Record Sales Journal			4,680.41	
			Totals for 06/30/17		5,256.23	4,680.41	(4,583.50)
07/07/17	7518		Nevada Department of Taxation		4,668.71		
07/31/17	99		Record Sales Journal		12.72		
07/31/17	99		Record Sales Journal			5,086.70	
			Totals for 07/31/17		4,681.43	5,086.70	(4,988.77)
08/10/17	7563		Nevada Department of Taxation		5,073.98		
08/31/17	99		Record Sales Journal		12.16		
08/31/17	99		Record Sales Journal			4,862.77	
			Totals for 08/31/17		5,086.14	4,862.77	(4,765.40)
09/10/17	7603		Nevada Department of Taxation		4,850.61		
09/30/17	99		Record Sales Journal		11.90		
09/30/17	99		Record Sales Journal			4,758.43	
			Totals for 09/30/17		4,862.51	4,758.43	(4,661.32)

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Bells Market LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
10/10/17	7646		Nv Department of Taxation		4,746.53		
10/31/17	10		Adj Sales Tax Payable per Return			85.21	
10/31/17	99		Record Sales Journal		12.79		
10/31/17	99		Record Sales Journal			5,115.19	
			Totals for 10/31/17		4,759.32	5,200.40	(5,102.40)
11/10/17	7698		Nevada Department of Taxation		5,102.40		
11/30/17	99		Record Sales Journal			4,538.66	
11/30/17	99		Record Sales Journal		11.35		
11/30/17	99		Nv Department of Taxation		11.90		
			Totals for 11/30/17		5,125.65	4,538.66	(4,515.41)
12/10/17	7740		Nevada Department of Taxation		4,527.31		
12/31/17	20		Adj Sales Taxes At 12/31/18			11.90	
12/31/17	99		Record Sales Journal		11.29		
12/31/17	99		Record Sales Journal			4,515.17	
			Totals for 12/31/17		4,538.60	4,527.07	(4,503.88)
			Totals for 2070		216,477.33	217,926.55	(4,503.88)
			Report Total				(4,503.88)

OUT OF BALANCE

Net Profit/(Loss)

Distribution count = 187

CML Las Vegas LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
2070 Sales Taxes Payable				0.00			
03/31/15	99		Record Deposit		4.12		
03/31/15	99		Record Deposit			1,645.81	
			Totals for 03/31/15		4.12	1,645.81	(1,641.69)
04/30/15	99		Record Sales		10.59		
04/30/15	99		Record Sales			4,234.72	
04/30/15	99.1		Record Bank Debits		1,645.81		
			Totals for 04/30/15		1,656.40	4,234.72	(4,220.01)
05/31/15	40		Record Cash Paid Outs		4,159.81		
05/31/15	99		Record Sales Journal		2.80		
05/31/15	99		Record Sales Journal			1,121.85	
			Totals for 05/31/15		4,162.61	1,121.85	(1,179.25)
06/30/15	99		To Record Sales Journal		4.16		
06/30/15	99		To Record Sales Journal			1,665.75	
06/30/15	99.1		To Record Bank Debits		1,119.05		
			Totals for 06/30/15		1,123.21	1,665.75	(1,721.79)
07/31/15	20		Record Sales			2,087.24	
			Totals for 07/31/15		0.00	2,087.24	(3,809.03)
08/31/15	20		Record Sales			1,967.12	
08/31/15	99.1		Record Bank Debits		2,403.74		
10/31/15	21		Correct Sales Taxes Payable YTD			2,233.58	
			Totals for 08/31/15		2,403.74	4,200.70	(5,605.99)
09/30/15	20		Record Sales			2,029.89	
09/30/15	99.1		Record Bank Debits		2,618.81		
			Totals for 09/30/15		2,618.81	2,029.89	(5,017.07)
10/31/15	99		Record Cash Receipts			2,225.55	
10/31/15	99.1		Record Cash Paid Outs		5,017.07		
11/30/15	20		Correct Oct Sales Taxes			4,614.52	
			Totals for 10/31/15		5,017.07	6,840.07	(6,840.07)
11/30/15	99		Record Cash Receipts			2,501.71	
11/30/15	99.1		Record Bank Debits		6,840.07		
			Totals for 11/30/15		6,840.07	2,501.71	(2,501.71)
12/31/15	23		Adj Sales Taxes Payable		6.32		
12/31/15	99		Record Cash Receipts			556.48	
12/31/15	99.1		Record Bank Debits		2,496.48		
			Totals for 12/31/15		2,502.80	556.48	(555.39)
01/31/16	99		Record Cash Receipts			2,294.18	
01/31/16	99.1		Record Bank Debits		555.39		
			Totals for 01/31/16		555.39	2,294.18	(2,294.18)
02/29/16	99		Record Cash Receipts			2,141.95	
			Totals for 02/29/16		0.00	2,141.95	(4,436.13)
03/31/16	99		Record Sales Journal			6,540.84	
03/31/16	99.1		Record Bank Debits		4,488.88		
			Totals for 03/31/16		4,488.88	6,540.84	(6,488.09)
04/30/16	99		Record Cash Receipts			3,878.66	

CML Las Vegas LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
			Totals for 04/30/16		0.00	3,878.66	(10,366.75)
05/31/16	99		To record Sales Journal			4,393.48	
05/31/16	99.1		To record Bank debits		9,620.63		
			Totals for 05/31/16		9,620.63	4,393.48	(5,139.60)
06/30/16	99		To record sales journal			1,120.39	
06/30/16	99.1		To record bank debits		4,388.66		
			Totals for 06/30/16		4,388.66	1,120.39	(1,871.33)
07/31/16	99		Record Cash Receipts			1,981.55	
			Totals for 07/31/16		0.00	1,981.55	(3,852.88)
08/31/16	99		REcord Cash Receipts			1,940.99	
08/31/16	99.1		Record Bank Debits		1,117.42		
			Totals for 08/31/16		1,117.42	1,940.99	(4,676.45)
09/30/16	99		Record Cash Receipts			4,042.65	
09/30/16	99.1		Record Bank Debits		3,970.57		
			Totals for 09/30/16		3,970.57	4,042.65	(4,748.53)
10/31/16	99		Record Cash Receipts			5,059.85	
			Totals for 10/31/16		0.00	5,059.85	(9,808.38)
11/30/16	99		Record Sales			3,150.41	
11/30/16	99.1		Record Bank Debits		9,205.81		
			Totals for 11/30/16		9,205.81	3,150.41	(3,752.98)
12/31/16	99		Record Cash Receipts			2,352.56	
12/31/16	99.1		Record Bank Debits		3,140.51		
			Totals for 12/31/16		3,140.51	2,352.56	(2,965.03)
01/31/17	99		Record Cash Receipts			5,296.49	
01/31/17	99.1		Record Bank Debits		2,344.90		
			Totals for 01/31/17		2,344.90	5,296.49	(5,916.62)
02/28/17	99		Record Cash Receipts			6,256.83	
02/28/17	99.1		Record Bank Debits		5,294.99		
			Totals for 02/28/17		5,294.99	6,256.83	(6,878.46)
03/31/17	99		Record Cash Receipts			11,019.33	
03/31/17	99.1		Record Bank Debits		6,259.53		
			Totals for 03/31/17		6,259.53	11,019.33	(11,638.26)
04/30/17	99		Record Cash Receipts			10,204.79	
04/30/17	99.1		Record Bank Debits		10,989.30		
			Totals for 04/30/17		10,989.30	10,204.79	(10,853.75)
05/31/17	99		Record Cash Receipts			8,117.16	
05/31/17	99.1		Record Bank Debits		10,186.79		
			Totals for 05/31/17		10,186.79	8,117.16	(8,784.12)
06/30/17	99		Record Cash Receipts			4,495.51	
06/30/17	99.1		Record Bank Debits		8,271.72		
			Totals for 06/30/17		8,271.72	4,495.51	(5,007.91)
07/31/17	99		Record Cash Receipts			6,254.09	
07/31/17	99.1		Record Bank Debits		4,484.95		

CML Las Vegas LLC
General Ledger - Period Subtotals
January 1, 2013 - December 31, 2017

Date	Reference	Journal	Description	Beginning Balance	Debit Amount	Credit Amount	Period End Balance
			Totals for 07/31/17		4,484.95	6,254.09	(6,777.05)
08/31/17	99		Record Cash Receipts			6,855.53	
08/31/17	99.1		Record Bank Debits		5,788.80		
			Totals for 08/31/17		5,788.80	6,855.53	(7,843.78)
09/30/17	99		Record Cash Receipts			8,868.52	
09/30/17	99.1		Record Bank Debits		7,102.61		
			Totals for 09/30/17		7,102.61	8,868.52	(9,609.69)
10/31/17	99		Record Cash Receipts			9,118.70	
10/31/17	99.1		Record Bank Debits		10,809.98		
			Totals for 10/31/17		10,809.98	9,118.70	(7,918.41)
11/30/17	99		Record Cash Receipts			5,358.33	
11/30/17	99.1		Record Bank Debits		9,025.48		
			Totals for 11/30/17		9,025.48	5,358.33	(4,251.26)
12/31/17	29		Adj Sales Taxes At 12/31/17			1,073.49	
12/31/17	99		Record Cash Receipts			6,303.96	
12/31/17	99.1		Record Bank Debits		6,286.82		
			Totals for 12/31/17		6,286.82	7,377.45	(5,341.89)
			Totals for 2070		149,662.57	155,004.46	(5,341.89)
			Report Total				(5,341.89)

OUT OF BALANCE

Net Profit/(Loss)

Distribution count = 70

Name	Position	Title	Percentage Owned
David Mckinley	Owner	CEO	50.00%
Tamer Elshakhs	Owner	General Manager	50.00%
Cathy Boutsikakis	Board member	Quality Control Unit Manager	0.00%
Jay Matos	Board member	Inventory Control Manager	0.00%
Michael McDonald	Board member	Security Operations Officer	0.00%
James Shosani	Board member	none	0.00%
James Dillingham	Board Member	none	0.00%

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov
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Fax: (775) 688-1303

BRIAN SANDOVAL
Governor
JAMES DEVOLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

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Las Vegas, Nevada 89101
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Fax: (702) 486-3377

ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, TAMER ELSHAKHS (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/17/18

State of ~~Nevada~~ California
County of Los Angeles

Signed and sworn to (or affirmed) before me on September 17, 2018 (date)

By Tamer Elshakhs (name(s) of person(s) making statement)

Notary Stamp	Signature of notarial officer
See Attached CA Jurat Form -CJM 9/17/18	

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

CALIFORNIA JURAT WITH AFFIANT STATEMENT **GOVERNMENT CODE § 8202**

☒ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], *not* Notary)

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Los Angeles

Subscribed and sworn to (or affirmed) before me on this 17 day of September, 2018, by
Date *Month* *Year*

(1) Tamer Elshakhr

(and (2) ———),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

CHUCK JIRO MURAYAMA
Notary Public - California
Los Angeles County
Commission # 2164542
My Comm. Expires Oct 9, 2020

Signature
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Attachment B **Document Date:** 9/17/18

Number of Pages: 1 **Signer(s) Other Than Named Above:** ———

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, David Anthony McKinley (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 0918/18

State of Nevada

County of Carson City

Signed and sworn to (or affirmed) before me on September 19th 2018 (date)

By David Anthony McKinley (name(s) of person(s) making statement)

ASHLEY AGUILAR
Notary Public - State of Nevada
Appointment Recorded in Carson City
No: 18-2973-3 - Expires July 26, 2022

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, James Cavanaugh Dillingham (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/17/2018

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 17, 2018 (date)
By James Cavanaugh Dillingham (name(s) of person(s) making statement)

DEVON MARGARET GUDKNECHT
Notary Public, State of Nevada
No. 17-2740-1
My Appt. Exp. Jan. 30, 2021

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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DEPARTMENT OF TAXATION
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Fax: (702) 486-3377

ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, James Shoshani (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 09/12/2018

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 12, 2018 (date)
By James Shoshani (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019

Notary Stamp 02/18/2019

Felipe I. Rodriguez

Signature of notarial officer

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DEPARTMENT OF TAXATION
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Henderson, Nevada 89074
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Fax: (702) 486-3377

ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Catherine Boutsikakis (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/19/18

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 9/19/18 (date)

By Catherine Boutsikakis (name(s) of person(s) making statement)

JENNIFER MEADS
Notary Public, State of Nevada
No. 06-103671-1
My Appt. Exp. Feb. 26, 2022

Notary Stamp

meads

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov
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Carson City, Nevada 89706-7937
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BRIAN SANDOVAL
Governor
JAMES DEVOLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

LAS VEGAS OFFICE
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Henderson, Nevada 89074
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Fax: (702) 486-3377

ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, John J. Matos (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/19/18

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 19, 2018 (date)
By John J. Matos (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019

Notary Stamp 02/18/2019

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA
DEPARTMENT OF TAXATION
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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Michael James McDonald (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

09-19-18

Signature of Owner, Officer or Board Member — Date Signed

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 19 2018 (date)
By Michael J McDonald (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019

Notary Stamp 02/18/2019

Signature of notarial officer

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☒ OR ☐ OF ☐ BM
EL-SHAKHS	TAMER	S	

Date of Birth: [redacted] Race: WHITE Ethnicity: EGYPTIAN-AMERICAN
Gender: MALE

Residence Address: [redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
OWNER AND GENERAL MANAGER

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☒ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☒ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☒ Yes ☐ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
TAMER ELSHAMAS	NEVCANN CULTIVATION	C056	OWNER

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

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Last Name:	First Name:	MI:	☒ OR ☐ OF ☐ BM
McKinley	David	A	

Date of Birth: [redacted]
Gender:
Race: White
Ethnicity: White

Residence Address:
[redacted]

City:	County:	State:	Zip:
[redacted]			

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Serve as owner and operations consultant to the entity

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☒ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ☐ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application?
☒ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☐ Yes ☐ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
Nevcann	01705109046761827904	056	Owner

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

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Last Name:	First Name:	MI:	☐ OR ☐ OF ☐ BM
Shoshani	James	S	

Date of Birth: [redacted]
Gender: Male
Race: White
Ethnicity: Chaldean

Residence Address: [redacted]

City:	County:	State:	Zip:
[redacted]		[redacted]	

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Board member-

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☒ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☒ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☐ Yes ☒ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
	NONE		

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ☐ BM
Matos	John	J	

Date of Birth: [redacted] Race: White Ethnicity: Hispanic
Gender: Male

Residence Address: [redacted]

City: [redacted] County: [redacted] State: Zip: [redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Compliance Officer: Ensure that the company is conducting business in full compliance with all state and local laws, regulations and procedures as well as ensuring that the SOP'S are enforced and followed.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☒ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☒ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☐ Yes ☒ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
	NONE		

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Last Name:	First Name:	MI:	☐ OR ☐ OF ☑ BM
Bautikakis	Catherine		

Date of Birth: [redacted] Race: White Ethnicity: American
Gender: Female

Residence Address: [redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Quality Control Manager, coordinating directly with the Inventory Control Manager, Jay Matos, to create and maintain regulatory compliance and marijuana product handling policies and procedures.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☑ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☑ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☑ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☑ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☑ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ☑ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☑ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☑ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☐ Yes ☑ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
	NONE		

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Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ■ BM
Dillingham	James	C	

Date of Birth: [redacted] Race: White Ethnicity: Caucasian
Gender: Male

Residence Address:
[redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
CFO for NevCann LLC.
I'm planning on handling all of the accounting and real estate for the business.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ■ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ■ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ■ No

Is this individual employed by or a contractor of the Department? ☐ Yes ■ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ■ Yes ☐ No

Is this individual a law enforcement officer? ☐ Yes ■ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ■ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ■ Yes ☐ No

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ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☒ Yes ☐ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
James Cavanaugh Dillingham	NevCann LLC.	co56	Board Member

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OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name: McDonald	First Name: Michael	MI: J.	☐ OR ☐ OF ☐ BM
Date of Birth: [redacted]	Race: White	Ethnicity:	
Gender: Male			
Residence Address: [redacted]			
City: [redacted]	County: [redacted]	State: [redacted]	Zip: [redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Security Operations Officer, responsible for training staff on all safety and security protocols.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☑ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☑ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☑ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☑ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☑ Yes ☐ No

Is this individual a law enforcement officer? ☑ Yes ☐ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☑ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☑ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov
1550 College Parkway, Suite 115
Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

RENO OFFICE
4600 Kietzke Lane
Building L, Suite 235
Reno, Nevada 89502
Phone: (775) 687-9999
Fax: (775) 688-1303

BRIAN SANDOVAL
Governor
JAMES DEVOLLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

LAS VEGAS OFFICE
Grant Sawyer Office Building, Suite1300
555 E. Washington Avenue
Las Vegas, Nevada 89101
Phone: (702) 486-2300 Fax: (702) 486-2373

HENDERSON OFFICE
2550 Paseo Verde Parkway, Suite 180
Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☐ Yes ☐ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
	None		

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Tamer El-Shakhs

Education:

1993 MFA School of Visual Arts, New York City
Master of Fine arts Degree in Photography

1989 BA Columbia College Columbia University, New York City
Bachelor of The Arts in Psychology

1985 Priceton High School Graduate, Princeton NJ

Experience:

2015 - Present
Best Practices Consultant for the "99 High Tide Collective"
A Medical Marijuana Dispensary in Malibu California

2009 - Present
Consultant for the "Green Goddess"
A (Pre ICO) Medical Marijuana Dispensary in Los Angeles CA

2007 - 2014
Officer of the "Green Dot Medicinal Cannabis Patients Group"
A (Pre ICO) Medical Marijuana Dispensary in Los Angeles CA

1989 - present
Freelance Photographer
Publications include: Allure, Harper's, Spin, High Times
Private clients include: Tiffany and Co.

1994- 1997
Manager of the Cove Gallery Provincetown MA
General Manager of an Art Gallery

1991-1993
Manager of "The Building" a major New York City Night Club.

1989-1994
Freelance event producer at night clubs in NYC including:
Nell's, MK, The Buliding, Rex.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

James Cavanaugh Dillingham

[redacted]

Experience:

2017-Present
Simply Vegas
Real Estate Agent Salesperson

2017 - Present
NevCann LLC
CFO- Board member and investor

2017-Present
Golden Dragon Capital LLC
Rental Properties

2017-Present
GDC Realty LLC
MMJ Cultivation Landlord
City of Las Vegas

2016 - 2018
Access Shot Tours LLC DBA Shoot Las Vegas
Investor and Director of Marketing
Gross Sales 2+ mm/ yr

2015-2017
Passion Parties INC
Board Member- Sold Company
Gross Sales 60+ mm/ yr

2013-2016
Passion Parties INC
U.S. Director of Operations
23 year Adult Product Distribution Company

2012-2013
Passion Parties INC
U.S. Acquisition and Merger dept head
23 year Adult Product Distribution Company

2010-2017

Lawrence Research Group LLC DBA Xandria Collection
President- Board member
41 year old adult products and video company
Gross sales 15 mm/ yr

2010-2012
Passion Parties INC
Project/ Warehouse manager
23 year Adult Product Distribution Company

Education:

2006-2010 Arizona State University
International Business
W.P. Carey School of Business

2006 Mid-Peninsula High School Graduate

David A. McKinley

Objective

My objective is to provide safe access and compassionate care to all medical marijuana patients. I pride myself on promoting medical marijuana with legally-recognized medical marijuana patients, and working toward building a stronger, more educated alternative treatment community one patient at a time.

Education

B.S. INTERNATIONAL BUSINESS | 1995 | UNIVERSITY OF SAN FRANCISCO

- Major: International Business
- Exchange student in Norway 1992 for an MBA program as an undergrad student

Skills & Abilities

LANGAGES SPOKEN:

FLUENT IN SPANISH (READ AND WRITE)

Experience

OWNER/OPERATOR | PHYTHO HEALING, INC. | FEBRUARY 2015 TO PRESENT

Successful owner/operator of indoor and outdoor grow medical marijuana collective.

VOLUNTEER FOR NON-PROFIT MEDICAL MARIJUANA MEDICAL COLLECTIVES IN CALIFORNIA 2011 TO 2015

Mastering the craft of cultivation, production and distribution of medical marijuana.

OWNER AND OPERATOR BLACKBURN REAL ESTATES- REAL ESTATE DEVELOPMENT IN COSTA RICA 2005-2011

- Management of all aspects of real estate development. From architectural design, engineering, legal, real estate translation, earth movement and excavation. Construction project manager. Worked on multi-million-dollar construction projects, and managed 40 full-time employees plus part-time employees.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Catherine Boutsikakis

> Consultant
> Staff Pharmacist
> Supervising Pharmacist

SUMMARY

Licensed pharmacist in Nevada and New York State with 25 years of experience providing top-notch pharmacy services in a retail setting. Outstanding interpersonal skills with a track record of establishing positive relationships. Respected leader, able to train and manage diverse teams to deliver peak performance.

EXPERIENCE

July 2015 - PRESENT

AB Consulting Group

Consultant

- Provide pharmaceutical consulting services i.e., expert advice on pharmacy services and medications.
- Provide social media consulting regarding medical cannabis.

August 2007 – August 2014

Pollina Pharmacy

Staff Pharmacist

Performed daily management of pharmacy, supervising all aspects of operations in absence of owner.

- Recognized for ability to manage a high volume of prescriptions.
- Cultivated strong network of physicians, resulting in an increase of new patients and revenue.
- Redesigned workflow for pharmacy operations to increase safety and productivity.
- Improved drug inventory management system to reduce waste and minimize back orders.

September 1993 – February 2006

Genovese Drug Stores / Eckerd Pharmacy

Supervising Pharmacist

- Managed ancillary staff and prepared shift schedules.
- Responsible for monitoring and maintaining inventory.
- Supervised and trained personnel and new pharmacists.
- Established and maintained professional working relationships with local health care providers.
- Managed one of the chain's "Fertility Sites", including dispensing of specialty drug products and compounding capsules and suppositories.
- Set up new pharmacies within the chain to meet federal, state and company specifications; then remain with the store for a select period to establish a relationship with the community

EDUCATION

May 1993

St John's University

Bachelor of Science in Pharmacy

SKILLS

- PDX and Optus Pharmacy systems
- MS Office
- Fluent in Greek

AWARDS

Received Eckerd Pharmacy Outstanding Pharmacy Management Award

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

JAMES SHOSHANI

[redacted]

EXPERIENCE

Cousins Maine Lobster

Owner | March 2015 - Current

- Owner/operator of multiple Las Vegas, Dallas and Houston franchise licenses generating over 2 million dollars in revenue
- Instituted policies in adherence with franchise regulations and standards
- Hired, recruit and train over 25 employees; ensuring staff members follow proper health guidelines
- Establish that safety standards are maintained while food is being prepared
- Maintain required records including food production, inventory, income/expense and personnel records
- Obtained permits necessary in multiple cities

White Cross Market

Owner | July 2013 – December 2015

- Complete redesign of location including, but not limited to creating and approving architectural planning in compliance with Clark County Building regulations, equipment purchasing and installation in compliance with Southern Nevada Health Department
- Established relationships with multiple food and beverage vendors
- Obtained privileged licenses such as gaming and liquor
- Ensure privileged licenses remained in compliance with regulations set forth by the Gaming Control Board and City of Las Vegas Business License
- Maintained inventory, banking and ordering responsibilities

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Bells Market 2

Owner | April 2010 – January 2018

- Oversee the remodel of location including new counter tops, shelving, updated equipment and outside façade
- Increased revenue from 30k a month to over 120k a month
- Performed all administrative duties and store operations
- Established a loyal customer base
- Hired, trained, scheduled six employees
- Obtained privileged licenses such as gaming and liquor
- Ensure privileged licenses remained in compliance with regulations set forth by the Gaming Control Board and City of Las Vegas Business License

Bells Market & Gas

Key Employee/Manager | April 2004 - April 2010

- Managed daily store operations including financial performance, fuel inventory, customer service and staff management
- Hired, trained, scheduled and completed payroll for eight employees
- Established a loyal customer base
- Obtaining privileged licenses such as gaming and beer and wine
- Assisted in obtaining liquor license in 2015
- Ensure privileged licenses remained in compliance with regulations set forth by the Gaming Control Board and City of Las Vegas Business License

AWARDS AND ACKNOWLEDGEMENTS

Proclamations from the City of Las Vegas' Mayor and City Council

- July 20th, 2013 was proclaimed White Cross Market Day in the City of Las Vegas
- July 1st, 2015 was proclaimed Jimmy Shoshani Day in the City of Las Vegas

Certificate of special recognition from Congresswoman Dina Titus on July 20th 2013

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

MICHAEL J. McDONALD

Education
Western High School
UNLV
LVMPD
Silver State Law Enforcement Academy / Post Certification

PROFESSIONAL EXPERIENCE
- Alexis Park Resort 84- 88
  Director of Guest Services
- LVMPD 89 - 99
- Las Vegas City Councilmen / Mayor Pro-Team 95- 03
- President of Alpha Omega Strategies 88-present
- Laughlin Constable 12 - present
- Chairman of the Nevada Repubican Party
- National Republican Party Member 12 - present

Other Boards served on
- Sons of Erin
- Notre Dame Club of Las Vegas
- Our Lady of Las Vegas Church
- Saint Anne's Catholic Church
- Elks Helldorado

A distinguished member of the Las Vegas Metropolitan Police Department, now retired, Michael J. McDonald was first elected to the office of Councilman for the City of Las Vegas, Ward 1, on June 6, 1995. He was re-elected on May 4, 1999 in the primary. He was the youngest person ever elected to the Las Vegas City Council and was also the first Las Vegas Councilman to hold dual badges of Councilman and Police Officer. Councilman McDonald was appointed Mayor Pro-Tem on July 14, 1997.

Councilman McDonald served as Chairman of Las Vegas Convention and Visitors Authority and Chairman of the Las Vegas Housing Authority. He also served in leadership roles as a committee member on the Emergency Operations Management Commission, Senior Citizens Advisory Board, Las Vegas Centennial Committee, Yucca Mountain Nuclear Repository Committee and the Clark County Debt Commission Committee.

A community activist, McDonald spearheaded the Community 89109 Project, was an active board member of the Boys & Girls Clubs of Las Vegas and Opportunity Village. He also serves on the Boards of the Youth Charities of Southern Nevada, the UNLV Boxing Club, UNLV Rebel Football Foundation, and the Las Vegas Springs Preserve.

During his two terms of office, Councilman McDonald created the Neighborhood Services Department, Rapid Response Division, a Council Action Request (CAR) Tracking System and held regular neighborhood meetings to inform constituents of Ward 1 developments. He also developed the Meadows Village Task Force to stop the proliferation of slumlords, drugs and prostitution in this area of the city.

He built All American Park, the first park specifically designed for youth football; Firefighter Memorial Park, dedicated to all firefighters in Clark County who died in the line of duty; and rehabbed Gary Dexter and Essex Circle Parks.

He accomplished tremendous redevelopment efforts in Ward 1; the Westlund Fair Shopping Center on Decatur and Charleston housing Super Wal-Mart and Lowe's, which created 800 new jobs for local residents. HCA Accounts Division relocated their offices to Decatur and Sahara, creating 600 new high-paying positions. These centers were built *without* using taxpayer monies and continue to thrive today.

AWARDS AND HONORS

- Commendation by Sheriff John Moran, July 2, 1992, for saving child's life in car accident, while transporting to Child Haven.
- UNLV Student of the Month Letter of Recognition from UNLV President Robert Maxson, July 1992.
- Meritorious Service Award, August 1993; entered a burning building at 3600 Swenson to save lives.
- Exemplary Service Award from Sheriff Jerry Keller, held in high esteem by members of LVMPD.
- Started campaign in 1993 against handbill distributors on the Las Vegas Strip, making hundreds of arrests and issuing numerous citations; presented case to Clark County Commission, who passed a new law in 1997 making handbill peddling illegal.
- Meritorious Service Award, May 199
- Community Service Award, May 1994
  (1st officer to receive both awards in one year)
- Nominated for the International Association of Chief of Police (IACP) Office of the Year Award, by Sheriff John Moran, May 1994
- Proclamation from Clark County Commissioners for 89109 Project.
- Proclamation from Governor Robert Miller, Michael J. McDonald Day of Honor, September 21, 1994.
- Senatorial Recognition from Senator Richard Bryan, October 20, 1994.
- Proclamation from Mayor & City Council, Michael J. McDonald Day, July 26, 1995, making history as first person granted legal permission to simultaneously serve as Councilman and Police Officer.

Jay Matos

> General Manager
> Government Affairs
> President

EXPERIENCE

February 2018 – April 2018

Medmen Dispensary

General Manager (Contractor)

Managed and executed the sale, conversion and transfer of Panacea systems and personnel to Medmen while staying open for business, keeping up with compliance and managing inventory in government database METRC.

August 2017 - 2018

Panacea / Just Quality Dispensary Grow & Production

General Manager (Contractor)

Responsible for bringing the dispensary into compliance with State regulations. Set policies and procedures for employees. Set budget, ordered products, managed quality control, store complaints. Facilitated sale of dispensary to Medmen.

2009 – Present

LeadNet, LLC

Government Affairs

Key Accomplishments:

- An intricate part of a team assisting and lobbying for the Medical Marijuana law in Nevada. Worked with most government agencies in NV, including municipalities, in developing and/or implementing policies. Well versed in MME laws; policies; processes and procedures of the industry; how an MME business operates, and how it affects the public.
- Planned and hosted a trip to Arizona for a contingent of Nevada lawmakers to educate them on local and state MME laws, policies and procedures and how MME facilities operate.
- Assisted the Clark County Commission with a town hall meeting to educate the public on how MME facilities operate under government law, policies and procedures; and hosted a workshop for Clark County staff, Metro Police and Fire Departments, the Health Department, NV Energy and SN Water District.
- Consistently attended Clark County open meetings on policy development.
- Negotiate retainer agreements with businesses to represent them as a liaison and work with NV Legislators, City Council, County Commissioners and staff to expedite client businesses' special use permits, licenses, zoning, ordinances and BDR's.
- Work with government officials on creating ordinances, regulations and policies and procedures. Host town hall meetings educating the public on new businesses entering their district/wards.

February 2003 – January 2009

NetFaze Technologies

President

Key Accomplishments:

- Managed operating budgets and Service Level Agreements in the hospitality, finance, transportation and retail industries.
- Managed United States Department of Energy, Bechtel Nevada operations, desktop deployment and telecom contracts with 96% customer service satisfaction.

SKILLS

Fluent in Spanish

Tamer El-Shakhs was born in Cairo Egypt and grew up in Princeton New Jersey his father was a Professor of Egyptian decent, his mother was an art teacher from Worcester Massachusetts. Tamer moved to New York City for College. After Graduating with a degree in Psychology from Columbia University Tamer became a professional Photographer. He then completed a Master of Fine Arts degree in Photography at The School of Visual Arts in Manhattan. Tamer had a successful career in photography and was published in varied and renowned magazines as well as having shows in galleries in New York City and Santa Fe New Mexico. Tamer also regularly created events, fundraisers, and art shows creating community support for various causes, both local and international. Ranging from supporting local efforts to resettle refugees in New Mexico, to providing earthquake relief in hard to reach areas in Nepal. Creating local support for deserving causes through art and community has been a recurring theme for Tamer from NYC to Santa Fe to Santa Monica and now in Las Vegas. Tamer has self published a Photography Book called “Prayer for Nepal”

While in New York City, Tamer also produced and promoted events at Night Clubs and performance venues. As a the manager of a major New York City night Club, Tamer worked closely with local authorities including Fire and Police personnel in continued compliance, crowd control, and monitoring of any disturbances.

Tamer as well as being an artist himself has also managed several art galleries over the years in New York City, Provincetown Massachusetts, and Santa Fe New Mexico. These businesses often served as a focal point for community events.

Tamer El-Shakhs moved to California in 2001 to work in the field of Medical Marijuana. Working closely with Allison Margolin, Bruce Margolin (Then president of NORML) and other key legal experts in the field. As a member of GLACA (Greater Los Angeles Caregiver Alliance) Tamer consulted with the team that wrote the ordinance that would become to adopted by City of Los Angeles. Tamer continues to work closely with Aaron Lachant and Steven Lubel, the two attorneys who drafted the ordinance. Tamer consulted for several legal medical Marijuana dispensaries in Los Angeles including The Green Dot Medicinal Cannabis Patients’ Group of which he was a founding member and Patient Coordinator, The Green Goddess Collective for which he has been coordinator and continues to be a consultant.

In Malibu Tamer has worked closely with the city in the evolving legal process of medical marijuana and compliance of one of the two allowed dispensaries in the City of Malibu. Tamer worked closely with the Mayor at the time Skylar Peak and the City Council in the process opening the 99 High Tide Collective. Tamer also helped coordinate a voter initiative in the City of Malibu that successfully collected enough signatures and was approved by the City Council. The initiative

wiil appear on the ballot in the next general election this November in Malibu.

Since 2001, Tamer has worked consulting in coordination of seven different locations of compliant medical marijuana dispensaries in Los Angeles.

James Cavanaugh Dillingham BIO

James Dillingham is a licensed and registered real estate agent/salesperson in Nevada. While at school, James also worked for SLE Entertainment; a premier concert, fundraiser, charity organization and nightlife booking company.

James is originally from San Francisco, CA. Growing up, James played football, baseball, did competitive skiing and wakeboarding. After graduating from Mid-Peninsula High School in 2006, James was pre-admitted to the well-established WP Carry business school at Arizona State University. In 2010, James had discovered an incredible opportunity in Las Vegas, NV.

When James moved to Las Vegas, he was able to secure the position of Project manager and Event coordinator for Passion Parties Inc. In 2010 Founder of Passion Parties Inc. William O. Dillingham was diagnosed with Liver Cancer and was given a short amount of time to live. He wanted James to come work for the company he and his business partner built. Bill would eventually lose his battle to cancer in 2015. Even up until his final days he had a hard time handing over the reigns. Passion Parties was a Multi-level marketing company that was founded in 1994. Passion Parties was a provider of adult products that were intended to be sold at "toy parties"; gatherings hosted by women, for women, to display the latest in adult products. Passion Parties, Inc. offered women the opportunity to create and manage their own business, while promoting sexual awareness and offering products to elevate the sex-lives of their clients.

As the Event Coordinator, James was able to create numerous charity events for Passion Parties. James worked hand in hand with the Susan G. Komen Breast Cancer Awareness. From organizing Charity Golf tournaments in the local area to planning out charity dinners for battered women, James' creativity and organization were incredibly beneficial for the charities, Passion Parties, and the Vegas community. By 2013, James' value to the company did not go unnoticed and was promoted to Director of Operations for the U.S. division. This promotion would give James the opportunity to work directly with thousands of Passion Party consultants all throughout the U.S., Canada and parts of Mexico. To further Passion Parties' philanthropic contributions, the Passion Parties Charitable Foundation also receives proceeds from the sales of the "Passion Parties Guide to Great Sex," which was written by Pat Davis (former president of Passion Parties) and published by Random House.

In 2010, The Passion Parties Charitable Foundation donated more than $40,000 to North American charities supporting women and children including: the National Multiple Sclerosis Society Southern California & Nevada Chapter, The Southern Nevada Affiliate of Susan G. Komen for the Cure, the Multiple Sclerosis Society of Canada Alberta & Northwest Territories Division, The Canadian Breast Cancer Foundation - Prairies/NWT Region, and regional Autism foundations. His favorite charities are St. Anthony's Meal Kitchen in San Francisco, Salvation Army, Our

Lady of Las Vegas Catholic Church and Alcoholics Anonymous. James has an interest in helping people, seeing changes and positive impacts in the community as a whole.

Lastly, James was very excited to move to Las Vegas because his Great Uncle, Cornelius "Neil" Smyth, use to tell him how great of a city it was and how he loved the people and cultural diversity. He was recruited by Caesars Palace of Las Vegas, where he served as chief financial officer. Later, he became vice president and chief operations officer for twenty years. He left Caesars to join the Sands Hotel and Casino, Las Vegas, as its president; and subsequently, returned to Caesars as executive vice president of Caesars World International in charge of marketing in Latin America, Spain, Portugal, and Australia. He was the co-founder of the U.S. National Table Tennis Championships. He is enshrined in both the U.S.A. and California Table Tennis Halls of Fame. He was the U.S. National, over 50 Doubles, Champion in 1985 and was the silver medalist in the U.S. National Senior Olympics singles over 65 in 1995. In addition, he won the over 80 North American singles championship in 2006 and 2007. Unfortunately, within a year moving to Nevada, Neil passed away.

They helped shape his integrity perseverance and compassion for others. The two men that James idolized the most and helped influence his moral compass were Bill, his father and Neil, great uncle who acted as a grandfather. One of the charities Neil interested James in was the Leukemia Society and habitat for humanity. James looks forward to continuing to improve the community.

David McKinley Bio

I was born on July 31, 1970 in San Diego, California. I am a native Californian, went to high school in Chula Vista and college in San Francisco. I graduated with a degree Bachelor of Science, International Business from the University of San Francisco in 1995.

Just like any other Californian, I had a dream of making it big in the movie industry. I interned in Los Angeles and tried the music and movie industry. I even worked as an extra during my summer vacations. After college, I worked as a snowboard instructor and bartender in Lake Tahoe and Idaho during the winter months. For the rest of the year I worked in the construction industry honing my business management and construction skills.

In 2005, I decided to try my luck and open my own business making use of my degree and learned skills. I packed my bags, moved to Costa Rica, and opened a real estate management company called Blackburn Real Estates. I worked on multi million construction projects. My company built custom homes, commercial buildings, and condominiums.

In 2011, I had a family emergency and had to move back to California. My father had pain management issues and told me that medical marijuana gave him relief and that he is no longer dependent on pain pills. I decided to learn more about this product.

In 2011 to 2015, I volunteered for various collectives all over California. I learned the craft of growing indoor, outdoor and mixed high cultivation. As a cultivator, I learned and maintained a wide selection and variety of high-quality medicines that have been proven to provide relief for patients with painful or debilitating symptoms of many select afflictions and disabilities such as Alzheimer's disease, HIV/AIDS, arthritis, cancer, Crohn's Disease, glaucoma, and multiple sclerosis. Each selection is in strict compliance with CA Proposition 215 and SB 420.

While volunteering I also learned manufacturing, production, infusion, extraction and distribution of all types of products from clones, concentrates, drinks and edibles.

Also, management of a collective was also a high priority.

In 2015, I opened my own indoor/outdoor cooperatives and maintain the highest-quality medical marijuana available.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

In 2016, I want to try my luck in opening a state of the art indoor cultivation and have available the best possible strains to provide relief for patients with painful or debilitating symptoms.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

James “Jimmy” Shoshani was born on January 22, 1982. Shortly after his birth, his family moved to San Diego. Then, in 1994, his family settled in Las Vegas. It was while Jimmy attended Mohave High School that his parents purchased their first business in Las Vegas, Quick Stop, a convenience store located on the corner of Lake Mead and Pecos. Jimmy began working for his father at Quick Stop and quickly learned the business. Within a few months, he was managing the store.

In 2004, Jimmy’s family purchased a struggling convenience store and gas station named Bells Market, located on the corner of H and Owens. Jimmy dedicated his time and attention to making Bells Market a success. Although the new business was located in a rough part of the city, Jimmy used his charm and outgoing personality to connect with the neighborhood and established a loyal clientele.

Jimmy and his family expanded the business again in 2010 with the purchase of Mighty Mart located on Las Vegas Boulevard and Oakey. They remodeled and rebranded the business as Bells Market 2. He was able to obtain a gaming, beer and liquor license for the property. He organized neighborhood events and donated supplies to leaders such as Councilman Bob Coffin. He became a part of the Beverly Green Community and found out how diverse the area was. He also found a great need for its residents, a grocery store, and that is when he opened up White Cross Market.

White Cross Pharmacy was a historic as one of the oldest drug stores in Las Vegas. When Jimmy found out that it was closing its doors, he went to speak with the owner to get more information regarding the property. It was then that Jimmy came up with White Cross Market, a full-service grocery store featuring a deli counter, organic produce, craft beer, and a large selection of groceries that cater to the diverse clientele of the surrounding neighborhood. White Cross Market opened in July 2013 with a ribbon-cutting given by Mayor Goodman, councilman Bob Coffin, and U.S. Representative Dina Titus. The city honored the first grocery store in Downtown by declaring July 20, 2013 as White Cross Market Day.

A year later, while watching an episode of his favorite tv show *Shark Tank*, he saw an episode that featured a follow-up story to a business named Cousins Maine Lobster, a company owned by Jim Telsksis and Sabin Lomac. They are two cousins from Maine who developed a gourmet food truck in Los Angeles that sold high quality, sustainable lobster rolls. They appeared on *Shark Tank* a few months prior asking for a shark to invest in a 2nd food truck. Barbara Cochran invested in the two cousins, and the follow-up episode showcased their success and also featured franchising opportunities. Jimmy quickly grabbed his phone and emailed the cousins expressing his interest. He believed authentic New England lobster rolls would be a great addition to the city. Jimmy flew out to Los Angeles to meet the cousins in person. They instantly clicked, and Jimmy was given franchise rights to Las Vegas. Cousins Maine Lobster Las Vegas opened in March 2015.

Jimmy was extremely busy overseeing the operations of both Bells Markets, White Cross Market and Cousins Maine Lobster. His hard work and contribution to the community didn't go unnoticed. On July 1, 2013, Mayor Carolyn Goodman and the City of Las Vegas recognized and honored him by declaring July 1, 2015 as Jimmy Shoshani Day. It was one of his proudest moments and something he could share with his family for years to come.

Jimmy continued to focus on business and in January 2017, Cousins Maine Lobster expanded with a 2nd truck in a permanent location at the Park on Fremont on the corner of Las Vegas Boulevard and Fremont street. Then, in June 2018, Jimmy expanded his business again with the opening of a quick-service kiosk inside of Las Vegas's first ever Smith's Marketplace on Warm Springs and Durango. A second kiosk will open inside the Smith's Marketplace on Sky Canyon at the end of 2018.

In February 2018, while visiting friends in Dallas, Texas, Jimmy learned that the franchises for Cousins Maine Lobster Dallas and Houston had suddenly become available. Jimmy saw an opportunity and quickly contacted Jim and Sabin to express his interest. Jimmy was ultimately sold on both franchises. Cousins Maine Lobster Dallas opened in May 2018, while Cousins Maine Lobster Houston is set to open this fall.

Catherine Boutsikakis

Catherine Boutsikakis is a licensed and registered Pharmacist in Nevada and New York State. She attended St. John's University College of Pharmacy and Allied Health Professions. While in school, she was active in the student chapter of the American Pharmaceutical Association and Lambda Kappa Sigma – a professional pharmacy sorority.

Both organizations were active in community outreach and educating the public on pharmacy and health care issues. Catherine graduated St. John's in May of 1993 with a Bachelor of Science in Pharmacy degree and began a long career in the pharmacy field.

Her first 13 years were spent working for Genovese Drug Stores (later Eckerd Pharmacy). Most of that time was spent as a Supervising Pharmacist where she was responsible for managing the pharmacy department – budgeting, scheduling, payroll, ordering, and inventory – in addition to her regular duties of dispensing and consulting.

In 2002, she was given an Outstanding Pharmacy Management Award. Her celebrated work as a manager led to being assigned extra projects. She was trained as a fertility specialist, which entailed becoming an expert on all medications used for fertility purposes including compounding capsules, creams, and suppositories. She was also selected to set up and open new chain locations. This gave her experience in government regulations as it involved filing paperwork with the State Board of Pharmacy and the DEA for licensing, registration, and controlled substance inventory. It also required physician outreach to familiarize health care providers in the area with the new store.

Another project required being sent to various stores, which were not compliant with policies and procedures, and reorganizing them to get them on track.

In 2007, she switched to an independent pharmacy practice setting. The focus there was more patient and community based as opposed to management, but she was responsible for the operations of the business when the owner was unavailable.

While still in New York, she was very active in the local elementary school. She spent three years on the School Leadership Team, a group comprised of teachers and parent representatives who develop educational policies for the school. They also make sure there are resources to support those policies. She also spent two years as the president of the Parent Teachers Association and was responsible for supporting the school by way of fundraising, hosting workshops, and organizing festivals and social events.

Upon moving to Las Vegas in 2015, she began freelance work for AB Consultant Group providing pharmaceutical consulting services. Beginning in December of 2017, she also began providing social media consulting by providing social media posts concerning medical cannabis and the health care field. In total she has been licensed and registered as a pharmacist for 25 years in New York State and for just over a year in Nevada. During this time, she has been actively keeping up with her continuing education classes across a broad spectrum of health care topics, including medical cannabis.

She is currently enrolled in the Cannabis Care Certification program through Americans For Safe Access Foundation.

Michael J. McDonald

Michael is the only son and youngest child of John and Doris McDonald, he is a first generation Nevadan and life long resident of Las Vegas. Michael is a proud alum of both Western High School and UNLV. However, he left UNLV to follow a calling to join the Las Vegas Metropolitan Police Department in 1989.

Michael found serving the public extremely rewarding and advanced in Metro quickly, but as fate would have it, on two occasions Officer McDonald responded to calls that would require him to disregard his own safety for the sake of the people that he vowed to protect and sustain injuries that would place him on light duty.

Michael would not let this cruel blow from fate stop him from serving his community. While on light duty he created Project 89109, a community policing project in a high crime area that helped the residents of that neighborhood join forces with elected officials, businesses and the LVMPD in order to clean up the area. The project was highly successful and with Officer McDonald's guidance and contributions to the outreach program he was nominated for the National Police Officer of the Year Award by the International Association of Chiefs of Police. The Department ultimately won the Webber Seavy Award for his efforts with Project 89109.

In 1995, a neophyte to local politics, Mr. McDonald entered the City Council race as a virtual unknown. Michael started is campaign with just $50.00 but, with his family, friends and supporters walking the neighborhoods to meet and listen to the residents of this forgotten corridor, he won the race in a huge upset and moved into City Hall as the youngest City Councilman ever elected.

During his tenure in City Hall, Michael was the only Republican City Councilman, the youngest elected official and the only person in history to hold duel badges. He was the youngest Mayor Pro Tem and the youngest Chairman for the Las Vegas Convention and Visitors Authority in Las Vegas history. At the time of his retirement from the LVMPD, Michael was one of the most highly decorated officers on the force. The service to his community and many contributions while serving it have resulted in accolades that include two Medals of Honor, letters of commendation, and awards for meritorious service, exemplary service, and community service. Michael has also received two keys to the city, as well as proclamations from the Mayor and the Las Vegas City Council for his numerous accomplishments within the City. He’s also been given proclamations from Clark County Commissioners and two different Nevada Governors. Michael has also received recognition from both of Nevada’s Congressional leaders, two different United States Senators and President Clinton.

In 2012 Michael returned to his law enforcement roots by joining the Laughlin Constable's Office. As a retired Officer of the LVMPD combined with his extensive knowledge of tactical weapons training and community policing he quickly rose through the ranks and is now the Assistant Constable for the City of Laughlin.

Currently, Michael is the longest serving State Chairman for the Nevada Republican Party and a member of the Republican National Committee. He is very active in local, state and national politics in both partisan and non partisan ways.

In 2008, Michael's beloved mother Doris fell ill. She was able to obtain some marijuana products that helped her regain her appetite, rest and helped ease her pain. Michael saw the positive effects that marijuana could have and soon found himself advocating for the legalization of medical and later recreational marijuana starting at the 2013 Nevada Legislature and beyond.

Michael is the President of Alpha Omega Strategies, a firm that specializes in government affairs, marketing and advertising. Michael joined forces with Jay Matos to assist Senator Segerblom at the 2013, 2015 and 2017 Legislative Sessions helping create the legislation for SB374.

Jay Matos

John "Jay" Matos is one of the longest and strongest supporters of the Nevada cannabis industry. He is a well-known cannabis consultant with over 15 prestigious clients, a founding member of the Clark County Green Ribbon Advisory Panel and helped write, gain support for and pass SB374 with Senator Tick Segerblom, bringing legalized medical marijuana to the patients of Nevada who needed it.

Jay hosted political fundraisers and campaign events in 2012 to build up support for SB374. Looking to form a group to help the push to reform Nevada's medical marijuana program, in March 2013 he visited the first dispensary opened in the state of Arizona, Arizona Organix, along with Nevada Judiciary Committee Members Mark Hutchison, Scott Hammond and Ruben Kihuen, non-member David Parks, Assemblywoman Michele Fiore, R-Las Vegas, Steve Yeager of the Clark County Public Defender's Office, Nevada media and staff.

Jay hosted a second trip to Arizona Organix with the Nevada Division of Public and Behavioral Health Director and staff along with the Clark County Business License Director, staff and Metropolitan Police narcotics representatives. A third trip was hosted by Mr. Matos for local municipalities. In attendance were City of Las Vegas, Clark County and Henderson representatives. In Nevada Jay provided an "In-Service Training" for Clark County staff from Business Licensing, Planning, Zoning, Fire, Metro and liaisons to many of the County Commissioners.

Jay is the owner of LeadNet, LLC a consulting firm in Nevada which specializes in cannabis consulting and compliance; mergers and acquisitions; licensing and critical management; government and public affairs. Through LeadNet, Jay and his staff negotiate retainer agreements with businesses to represent them as a liaison on state and local municipal issues including working with Nevada Dept. of Taxation, City Council, County Commissioners and staff in compliance, applying for special use permits, restricted licenses, privilege licenses, zoning, ordinances and many other government processes and procedures.

Having been raised in Las Vegas from the age of 12-22 Mr. Matos has a huge heart for the Las Vegas community and does what he can to assist and serve the under privileged children of the valley and their families. He is the Director of GR8 Community Development Corporation, a non-profit started by he and his wife in 2014. Through GR8 over 5,000 children have been assisted with toys for Christmas and back to school supplies. In 2014 and 2015 large toy drives were held to help support the Las Vegas Rescue Mission and toys were distributed to roughly 2,000 less fortunate children each year so that they would have something to open on Christmas morning. In August of 2018 GR8 participated in Commissioner Lawrence Weekly's Back to School Fair and distributed 2,000 lunch boxes, notebooks, pencils, sharpeners, rulers and pencil cases to make sure the children had what they needed to start the new school year on the right foot. This year a turkey and food drive is being held with hopes to assist 1,000 families with putting a Thanksgiving meal on their table and another Christmas Toy Drive will also be held to bring holiday cheer to as many children as possible.

GR8 Community Development Corporation also has a youth sports program which currently runs eighteen club baseball teams called CBA Nevada; with over 200 players it helps to keep kids off the streets, out of trouble, focused on their education and working hard towards their future and long-term goals. Fund raisers are held yearly and sponsorships are given to those children who have a love for baseball but may not otherwise be able to afford to play. GR8 also hosts an annual CBA College Baseball Camp in conjunction with the LVCVA (Las Vegas Convention and Vacation Authority) and Las Vegas 51's that brings in 30-40 of the top college coaches to work with and possibly recruit 100 of the most talented high school players. Through CBA and the camp over 300 players have been put into college.

Jay Matos was born in New York, lived most of his younger years surrounded by his heritage in Puerto Rico, moved to Las Vegas at the age of 12 and then at the age of 22 he moved to Boston, MA to pursue a technology career, he lived there for eight years until his return to Las Vegas in 1999. He has been married for 21 years to his wife, Cheri and they have four boys; Jaytee (25), Jayden (17), Jayzic (11) and Jaymin (5) as well as a granddaughter, Lyric (2).

STATE OF NEVADA
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WILLIAM D. ANDERSON
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Fax: (702) 486-3377

ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, TAMER EL SHAKHS, am the duly authorized representative of NEVCANN LLC, to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

By signing this Request and Consent to Release Application Form, I hereby acknowledge and agree that the State of Nevada, its sub-departments including the Department of Taxation and its employees are not responsible for any consequences related to the release of the information identified in this consent. I further acknowledge and agree that the State and its sub-departments and its employees cannot make any guarantees or be held liable related to the confidentiality and safe keeping of this information once it is released.

Date: 9/17/18

Signature of Requestor/Applicant or Designee

State of Nevada ~~CJM~~ California
County of Los Angeles

Signed and sworn to (or affirmed) before me on September 17, 2018 (date)

By Tamer Elshakhs (name(s) of person(s) making statement)

- See Attached CA Jurat Form CJM - 9/17/2018 Notary Stamp	Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

CALIFORNIA JURAT WITH AFFIANT STATEMENT **GOVERNMENT CODE § 8202**

☒ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], *not* Notary)

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Los Angeles

Subscribed and sworn to (or affirmed) before me on this 17 day of September, 2018, by
Date *Month* *Year*

(1) Tamer Elshakhs

(and (2) ———),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

CHUCK JIRO MURAYAMA
Notary Public - California
Los Angeles County
Commission # 2164542
My Comm. Expires Oct 9, 2020

Signature
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Attachment D **Document Date:** Sept. 17, 2018

Number of Pages: 1 **Signer(s) Other Than Named Above:** ———

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ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, David Anthony McKinley, am the duly authorized representative of

NevCann to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Date: 9/19/18

Signature of Requestor/Applicant or Designee

State of Nevada

County of Carson City

Signed and sworn to (or affirmed) before me on September 19th 2018 (date)

By David Anthony McKinley (name(s) of person(s) making statement)

ASHLEY AGUILAR
Notary Public - State of Nevada
Appointment Recorded in Carson City
No: 18-2973-3 - Expires July 26, 2022

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, Catherine Boutsikakis, am the duly authorized representative of Nevcann LLC to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Catherine B Date: 9/19/18
Signature of Requestor/Applicant or Designee

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 9/19/18 (date)

By Catherine Boutsikakis (name(s) of person(s) making statement)

JENNIFER MEADS
Notary Public, State of Nevada
No. 06-103671-1
My Appt. Exp. Feb. 26, 2022

Notary Stamp

meads

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, James Cavanaugh Dillingham, am the duly authorized representative of

NevCann LLC to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Date: 09/17/18

Signature of Requestor/Applicant or Designee

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on September 17, 2018 (date)

By James Cavanaugh Dillingham (name(s) of person(s) making statement)

DEVON MARGARET GUDKNECHT Notary Public, State of Nevada No. 17-2740-1 My Appt. Exp. Jan. 30, 2021 Notary Stamp	Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, James Shoshani, am the duly authorized representative of

NevCann LLC to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Signature of Requestor/Applicant or Designee Date: 09/12/2018

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 12, 2018 (date)
By James Shoshani (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019
02/18/2019

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT D
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RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I. John J. Matos, am the duly authorized representative of

Nevcann to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Signature of Requestor/Applicant or Designee Date: 9/19/18

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on September 19, 2018 (date)

By John J. Matos (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019

Notary Stamp 02/18/2019

Signature of notarial officer

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ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, Michael James McDonald, am the duly authorized representative of

Just Quality NevCann LLC to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

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Date: 09-19-18

Signature of Requestor/Applicant or Designee

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on September 19, 2018 (date)

By Michael J McDonald (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ Notary Public State of Nevada No. 07-1486-1 My Appt. Exp. February 18, 2019 02/18/2019 Notary Stamp	Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

■Applicant

NAME (FIRST MIDDLE LAST) David Anthony McKinley	DATE OF BIRTH [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID) [redacted]	MOBILE PHONE NUMBER [redacted]
PHYSICAL ADDRESS2	HOME PHONE NUMBER
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	SOCIAL SECURITY NUMBER (optional) [redacted]
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE) [redacted]	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ■OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ■OWNER ☐OFFICER ☐BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE	DATE OF APPLICATION 09/18/18

■Identification

CITIZENSHIP US Citizen		
GOVERNMENT ENTITY (STATE OR COUNTRY) USA	GOVERNMENT IDENTIFICATION TYPE Passport	GOVERNMENT ID NUMBER [redacted]

■Other Information

EYE COLOR Blue	HAIR COLOR Brown	HEIGHT (INCHES) 5'11"	WEIGHT (LBS) 185
GENDER Male	ETHNICITY White	RACE White	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

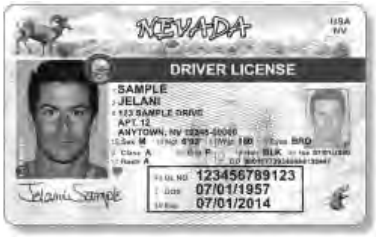
☐Cultivation ☐Production ■Dispensary ☐Laboratory ☐Distributor

NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front



■Name

NAME
David Anthony McKinley
PHYSICAL ADDRESS
[redacted]
PHYSICAL CITY, STATE ZIP CODE
[redacted]

Copy the front of driver's license (or state/federal issued photo identification) into the area below.
If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■Name

NAME
David Anthony McKinley
PHYSICAL ADDRESS
[redacted]
PHYSICAL CITY, STATE ZIPCODE
[redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: [redacted]_____ DOB: [redacted]_____ SSN(optional): [redacted]_____

Mailing Address of Applicant: P.O.BOX 15253

City: [redacted]_____ State: [redacted]_____ Zip: [redacted]_____

Applicant Attestations

1. I, David Anthony McKinley , attest that I have not been convicted of an excluded felony offense.
2. I, David Anthony McKinley, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: 1800007259.
3. I, David Anthony McKinley , attest that I have not had a marijuana establishment agent registration card revoked.
4. I, David Anthony McKinley , attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 09/18/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: David Anthony McKinley DOB: [redacted] SSN (optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, David Anthony McKinley, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/18/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

   A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
   In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: McKinley, David, Anthony
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 09/18/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

■Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

■Applicant

NAME (FIRST MIDDLE LAST) David Anthony McKinley	SOCIAL SECURITY NUMBER (optional) [redacted]
PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID) [redacted]	CITIZENSHIP US Citizen
PHYSICAL ADDRESS LINE 2	MOBILE PHONE NUMBER [redacted]
PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	HOME PHONE NUMBER
EYE COLOR Blue / HAIR COLOR Brown	WEIGHT (LBS) 185
ETHNICITY White / GENDER Male	HEIGHT (INCHES) 5'11"
RACE White	
PLACE OF BIRTH San Diego	DATE OF BIRTH [redacted]

■Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME NevCann	ESTABLISHMENT CODE C056
CERTIFICATE 01705109046761827904	ESTABLISHMENT TYPE Applying for Dispensary

■Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [ ] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP: FINGERPRINTING EXPRESS

FINGERPRINT REPRESENTATIVE SIGNATURE: CMcMahan

TCN#: NVPS4B0016698A

DATE: SEP 19 2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST) TAMER SALAH EL-SHAKHS	DATE OF BIRTH [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID) [redacted]	MOBILE PHONE NUMBER [redacted]
[redacted]	HOME PHONE NUMBER [redacted]
[redacted]	SOCIAL SECURITY NUMBER (optional)
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE) [redacted]	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☒OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ☒OWNER ☒OFFICER ☐BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE	DATE OF APPLICATION 9/18/18

Identification

CITIZENSHIP U.S.		
GOVERNMENT ENTITY (STATE OR COUNTRY) CA	GOVERNMENT IDENTIFICATION TYPE DRIVERS LICENSE	GOVERNMENT ID NUMBER [redacted]

Other Information

EYE COLOR BROWN	HAIR COLOR BLACK	HEIGHT (INCHES) 72"	WEIGHT (LBS) 290
GENDER MALE	ETHNICITY EGYPTIAN	RACE WHITE	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

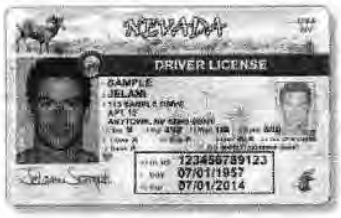
☐Cultivation ☐Production ☒Dispensary ☐Laboratory ☐Distributor

NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front



■Name

NAME TAMER ELSHAKAB

PHYSICAL ADDRESS [redacted]

PHYSICAL C

Copy the front of driver's license (or state/federal issued photo identification) into the area below.
If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■Name

NAME	TAMER ELSHAKHS
PHYSICAL ADDRESS	[redacted]
PHYSICAL CITY	

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: TAMER ELSHAKHS DOB: 9/7/67 SSN(optional): _____

Mailing Address of Applicant: [redacted]

City: [redacted] State [redacted] Zip: [redacted]

Applicant Attestations

1. I, TAMER ELSHAKHS, attest that I have not been convicted of an excluded felony offense.
2. I, TAMER ELSHAKHS, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: _____.
3. I, TAMER ELSHAKHS, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, TAMER ELSHAKHS, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 9/15/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: TANER ELSHAKHS DOB: 9/9/67 SSN (optional): _____

Mailing Address of Applicant: [redacted]

City: [redacted] State [redacted] Zip: [redacted]

I, TANER ELSHAKHS, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/18/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: EL-SHAKHS, TAMER SALAH
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 9/18/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST): John Jay Matos	DATE OF BIRTH: [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID): [redacted]	MOBILE PHONE NUMBER: [redacted]
PHYSICAL ADDRESS2:	HOME PHONE NUMBER:
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE): [redacted]	SOCIAL SECURITY NUMBER (optional): [redacted]
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE):	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☒OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2:	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ☐OWNER ☐OFFICER ☒BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE):	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL: [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE:	DATE OF APPLICATION: 9/20/18

Identification

CITIZENSHIP:		
GOVERNMENT ENTITY (STATE OR COUNTRY): Nevada	GOVERNMENT IDENTIFICATION TYPE: Driver License	GOVERNMENT ID NUMBER: [redacted]

Other Information

EYE COLOR: Brown	HAIR COLOR: Brown	HEIGHT (INCHES): 5'7"	WEIGHT (LBS): 245 lbs
GENDER: Male	ETHNICITY: White	RACE: Hispanic	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

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NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front

■ Name

NAME

John J Matos

PHYSICAL ADDRESS

[redacted]

PHYSICAL CITY STATE ZIPCODE

[redacted]

Copy the front of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

[redacted]

■ Name

NAME John J. Matos

PHYSICAL ADDRESS [redacted]

PHYSICAL CITY, STATE ZIPCODE [redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: John J. Matos DOB: [redacted] SSN(optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

Applicant Attestations

1. I, John J. Matos, attest that I have not been convicted of an excluded felony offense.
2. I, John J. Matos, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: 1600004940.
3. I, John J. Matos, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, John J. Matos, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: John J. Matos DOB: [redacted] SSN (optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, John J. Matos, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Matos, John, Jay
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST): John Jay Matos

SOCIAL SECURITY NUMBER (optional): [redacted]

PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID): [redacted]

CITIZENSHIP: U.S. Citizen

PHYSICAL ADDRESS LINE 2:

MOBILE PHONE NUMBER: [redacted]

PHYSICAL CITY, STATE, ZIPCODE (FOR CITY PROVINCE POSTAL CODE): [redacted]

HOME PHONE NUMBER:

EYE COLOR: Brown

HAIR COLOR: Brown

WEIGHT (LBS): 245 lbs.

ETHNICITY: White

GENDER: Male

HEIGHT (FT-IN): 5' 7''

RACE: Hispanic

PLACE OF BIRTH: New York, NY

DATE OF BIRTH: [redacted]

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME: Nevcann

ESTABLISHMENT CODE:

CERTIFICATE:

ESTABLISHMENT TYPE: Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [x] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP:
Fingerprints Processed by
B&D Fingerprinting Services, LLC
800 N Rainbow Blvd., Ste 175.
Las Vegas, NV 89107
(702) 485-5256
info@bdfingerprinting.com

FINGERPRINT TECHNICIAN'S SIGNATURE:

TCN#: NVPS1E5015000A MED

DATE: 9-19-18

NVPS1E5015001A REC

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST) TAMER SALAH ELSHAKHS		SOCIAL SECURITY NUMBER (optional)
PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID) [redacted]		CITIZENSHIP US
PHYSICAL ADDRESS LINE 2		MOBILE PHONE NUMBER [redacted]
PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]		HOME PHONE NUMBER [redacted]
EYE COLOR BROWN	HAIR COLOR BLACK	WEIGHT (LBS) 290
ETHNICITY EGYPTIAN-AMERICAN	GENDER MALE	HEIGHT (INCHES) 72
RACE WHITE		
PLACE OF BIRTH CAIRO EGYPT		DATE OF BIRTH [redacted]

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME NEVCANN	ESTABLISHMENT CODE C056
CERTIFICATE	ESTABLISHMENT TYPE Applying for Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- (●) Current Owner/Officer/Board Member — NRS 453A.322
- (●) Prospective Owner/Officer/Board Member — NRS 453A.334
- (●) Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- (●) Current Owner/Officer/Board Member — NRS 453D
- (●) Prospective Owner/Officer/Board Member — NRS 453D
- (●) Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP
Fingerprints Processed by
B&D Fingerprinting Services, LLC
800 N Rainbow Blvd., Ste 175,
Las Vegas, NV 89107
(702) 485-5256
info@bdfingerprinting.com

FINGERPRINT REPRESENTATIVE SIGNATURE

TCN# NVPSIE5014934A

DATE 9-18-18

NVPSIE5014935A

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST) James Cavanaugh Dillingham	DATE OF BIRTH [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID) [redacted]	MOBILE PHONE NUMBER [redacted]
PHYSICAL ADDRESS2	HOME PHONE NUMBER
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	SOCIAL SECURITY NUMBER (optional)
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE)	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☒OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ☐OWNER ☐OFFICER ☐BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE)	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE James C. Dillingham	DATE OF APPLICATION 09-18-18

Identification

CITIZENSHIP United States of America		
GOVERNMENT ENTITY (STATE OR COUNTRY) Nevada	GOVERNMENT IDENTIFICATION TYPE Driver License	GOVERNMENT ID NUMBER [redacted]

Other Information

EYE COLOR brown	HAIR COLOR brown	HEIGHT (INCHES) 73 inches	WEIGHT (LBS) 220 lbs
GENDER male	ETHNICITY caucasian	RACE white	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

☐Cultivation ☐Production ☒Dispensary ☐Laboratory ☐Distributor

NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front

■Name

NAME
James Cavanaugh Dillingham
PHYSICAL ADDRESS
[redacted]
PHYSICAL CITY, STATE ZIPCODE
[redacted]

Copy the front of driver's license (or state/federal issued photo identification) into the area below.
If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■Name

NAME

James Cavanaugh Dillingham

PHYSICAL ADDRESS

[redacted]

PHYSICAL CITY, STATE ZIP CODE

[redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: James Cavanaugh Dillingham DOB: [redacted] SSN(optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

Applicant Attestations

1. I, James Cavanaugh Dillingham, attest that I have not been convicted of an excluded felony offense.
2. I, James Cavanaugh Dillingham, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: waiting for card delivery.
3. I, James Cavanaugh Dillingham, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, James Cavanaugh Dillingham, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: Date: 09/17/2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: James Cavanaugh Dillingham DOB: [redacted] SSN (optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, James Cavanaugh Dillingham, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/17/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Dillingham, James, Cavanaugh
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 09/17/2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST) James Cavanaugh Dillingham		SOCIAL SECURITY NUMBER (optional) [redacted]
PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID) [redacted]		CITIZENSHIP United States of America
PHYSICAL ADDRESS LINE 2		MOBILE PHONE NUMBER [redacted]
PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]		HOME PHONE NUMBER
EYE COLOR Brown	HAIR COLOR Brown	WEIGHT (LBS) 220 lbs
ETHNICITY caucasian	GENDER male	HEIGHT (INCHES) 73 inches
RACE white		
PLACE OF BIRTH San Francisco		DATE OF BIRTH [redacted]

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME NevCann LLC	ESTABLISHMENT CODE C056
CERTIFICATE 01705109046761827904	ESTABLISHMENT TYPE Applying for Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [x] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards, one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP
Fingerprints Processed by
B&D Fingerprinting Services, LLC
800 N Rainbow Blvd., Ste 175.
Las Vegas, NV 89107
(702) 485-5256
info@bdfingerprinting.com

FINGERPRINT REPRESENTATIVE SIGNATURE

TCN# NVPSIES014931A

DATE 9-17-18

NVPSIES014932A

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST) James Sabah Shoshani	DATE OF BIRTH [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID) [redacted]	MOBILE PHONE NUMBER [redacted]
PHYSICAL ADDRESS2 [redacted]	HOME PHONE NUMBER
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	SOCIAL SECURITY NUMBER (optional) [redacted]
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE)	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☒OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2 Henderson NV 89052	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ☐OWNER ☐OFFICER ☒BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL James Shoshani	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE	DATE OF APPLICATION 09/12/2018

Identification

CITIZENSHIP USA		
GOVERNMENT ENTITY (STATE OR COUNTRY) Nevada	GOVERNMENT IDENTIFICATION TYPE Drivers License	GOVERNMENT ID NUMBER [redacted]

Other Information

EYE COLOR brown	HAIR COLOR black	HEIGHT (INCHES) 5'9"	WEIGHT (LBS) 220
GENDER Male	ETHNICITY Chaldean	RACE WHITE	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

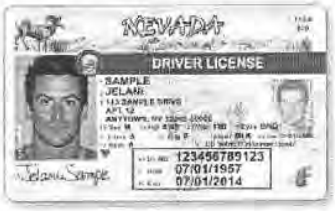
☐Cultivation ☐Production ☒Dispensary ☐Laboratory ☐Distributor

NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front



■Name

NAME
James S Shoshani

PHYSICAL ADDRESS
[redacted]

PHYSICAL CITY, STATE ZIPCODE
[redacted]

Copy the front of driver's license (or state/federal issued photo identification) into the area below.
If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■Name

NAME
James Shoshani
PHYSICAL ADDRESS
[redacted]
PHYSICAL CITY, STATE ZIP CODE
[redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: James Shoshani DOB: [redacted] SSN(optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

Applicant Attestations

1. I, James shoshani, attest that I have not been convicted of an excluded felony offense.
2. I, James Shoshani, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: _____.
3. I, James Shoshani, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, James Shoshani, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 09/12/2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: James Shoshani DOB: [redacted] SSN (optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, James Shoshani, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: Date: 09/12/2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Shoshani, James, Sabah
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 09/12/2018

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST) James Sabah Shoshani		SOCIAL SECURITY NUMBER (optional) [redacted]
PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID) [redacted]		CITIZENSHIP USA
PHYSICAL ADDRESS LINE 2		MOBILE PHONE NUMBER [redacted]
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]		HOME PHONE NUMBER
EYE COLOR	HAIR COLOR	WEIGHT (LBS) 220
ETHNICITY Chaldean	GENDER Male	HEIGHT (INCHES) 5'9"
RACE WHITE		
PLACE OF BIRTH Detroit Michigan		DATE OF BIRTH [redacted]

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME NevCANN	ESTABLISHMENT CODE C056
CERTIFICATE 01705109046761827904	ESTABLISHMENT TYPE Applying for Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [x] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

NVPSIE0024812A

FINGERPRINT AGENCY STAMP

D&D Fingerprinting Services, LLC
800 N Rainbow Blvd #175
Las Vegas, NV 89107

FINGERPRINT REPRESENTATIVE SIGNATURE

TCN# NVPSIE0024813A

DATE 9-14-18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST) Catherine Boutsikakis	DATE OF BIRTH [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID) [redacted]	MOBILE PHONE NUMBER [redacted]
PHYSICAL ADDRESS2	HOME PHONE NUMBER [redacted]
PHYSICAL CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE) [redacted]	SOCIAL SECURITY NUMBER (optional)
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE)	APPLICANT ROLE (CHECK ALL THAT APPLY) ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☑OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY) ☐OWNER ☐OFFICER ☑BOARD MEMBER
MAILING CITY, STATE ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE)	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE [signature]	DATE OF APPLICATION 9/19/18

Identification

CITIZENSHIP U.S.A.		
GOVERNMENT ENTITY (STATE OR COUNTRY) Nevada	GOVERNMENT IDENTIFICATION TYPE Driver License	GOVERNMENT ID NUMBER [redacted]

Other Information

EYE COLOR Brown	HAIR COLOR Brown	HEIGHT (INCHES) 64"	WEIGHT (LBS) 130
GENDER Female	ETHNICITY American	RACE White	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

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NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front

■Name

NAME	Catherine Bartsikaki 3
PHYSICAL ADDRESS	[redacted]
PHYSICAL CITY, STATE ZIP CODE	[redacted]

Copy the front of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■Name

NAME Catherine Bartsikakis

PHYSICAL ADDRESS [redacted]

PHYSICAL CITY, STATE ZIPCODE [redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: Catherine Boutsikakis DOB: [redacted] SSN(optional): _____

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

Applicant Attestations

1. I, Catherine Boutsikakis, attest that I have not been convicted of an excluded felony offense.
2. I, Catherine Boutsikakis, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: _____.
3. I, Catherine Boutsikakis, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, Catherine Boutsikakis, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 9/19/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: Catherine Boutsikakis DOB: 12/26/1970 SSN (optional): _____

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, Catherine Boutsikakis, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/19/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Bartsikakis, Catherine
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: Catherine Bar

Date: 9/19/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST): Catherine Boutsikakis	SOCIAL SECURITY NUMBER (optional):
PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID): [redacted]	CITIZENSHIP: USA
PHYSICAL ADDRESS LINE 2:	MOBILE PHONE NUMBER: [redacted]
PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE): [redacted]	HOME PHONE NUMBER: [redacted]
EYE COLOR: Brown / HAIR COLOR: Brown	WEIGHT (LBS): 130
ETHNICITY: American / GENDER: Female	HEIGHT (INCHES): 64"
RACE: White	
PLACE OF BIRTH: Brooklyn, N.Y., U.S.A.	DATE OF BIRTH: [redacted]

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME: Nevcann LLC	ESTABLISHMENT CODE: C056
CERTIFICATE: 01705109046761827904	ESTABLISHMENT TYPE: Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [x] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP
Fingerprints Processed by
B&D Fingerprinting Services, LLC
800 N Rainbow Blvd., Ste 175,
Las Vegas, NV 89107
(702) 485-5256
info@bdfingerprinting.com

FINGERPRINT REPRESENTATIVE SIGNATURE: Ella Clifford

TCN# NVPS1E50149USA

DATE 9-19-18

NVPS1E50149USA

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Basic Information Document

The information on this form is required for all agent registration applications. Enter the required information below, print and sign where required.

Please type or print legibly.

Applicant

NAME (FIRST MIDDLE LAST): John Jay Matos	DATE OF BIRTH: [redacted]
PHYSICAL ADDRESS1 (ADDRESS ON GOVERNMENT ID): [redacted]	MOBILE PHONE NUMBER: [redacted]
PHYSICAL ADDRESS2:	HOME PHONE NUMBER:
PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE): [redacted]	SOCIAL SECURITY NUMBER (optional): [redacted]
MAILING ADDRESS1 (IF DIFFERENT FROM ABOVE):	APPLICANT ROLE (CHECK ALL THAT APPLY): ☐EMPLOYEE ☐CONTRACTOR ☐VOLUNTEER ☒OWNER/OFFICER/BOARD MEMBER
MAILING ADDRESS2:	IF OWNER/OFFICER/BOARD MEMBER (CHECK ALL THAT APPLY): ☐OWNER ☐OFFICER ☒BOARD MEMBER
MAILING CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE):	IF OWNER/OFFICER/BOARD MEMBER, LIST 4-DIGIT ME CODE: C056
EMAIL: [redacted]	IF CONTRACTOR OR DISTRIBUTOR, LIST PARENT COMPANY:
SIGNATURE:	DATE OF APPLICATION: 9/20/18

Identification

CITIZENSHIP:		
GOVERNMENT ENTITY (STATE OR COUNTRY): Nevada	GOVERNMENT IDENTIFICATION TYPE: Driver License	GOVERNMENT ID NUMBER: [redacted]

Other Information

EYE COLOR: Brown	HAIR COLOR: Brown	HEIGHT (INCHES): 5'7"	WEIGHT (LBS): 245 lbs
GENDER: Male	ETHNICITY: White	RACE: Hispanic	

■ Establishment Category: You may apply for more than one category of agent card, but must include $75 for each category you are applying for. Check the categories you wish to apply for.

☐Cultivation ☐Production ☒Dispensary ☐Laboratory ☐Distributor

NEW

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Front

■ Name

NAME

John J Matos

PHYSICAL ADDRESS

897 Eureka Falls Ct

PHYSICAL CITY STATE ZIPCODE

Henderson, NV 89052

Copy the front of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Driver's License Back

■ Name

NAME

John J. Matos

PHYSICAL ADDRESS

[redacted]

PHYSICAL CITY, STATE ZIPCODE

[redacted]

Copy the back of driver's license (or state/federal issued photo identification) into the area below. If photocopying, insert this sheet into the photocopy machine.

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Required Attestation Form

All agent applicants must attest to the following:

1. They have not been convicted of an excluded offense. An excluded offense is a crime of violence or a violation of a state or federal law pertaining to controlled substances if the law was punishable as a felony in the jurisdiction where the person was convicted.
2. They do not currently have an establishment agent registration card, or if they do, they must supply the card number of the current card.
3. They have not had a marijuana establishment agent card revoked.
4. They are in compliance with any court order for the support of a child.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: John J. Matos DOB: [redacted] SSN(optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

Applicant Attestations

1. I, John J. Matos, attest that I have not been convicted of an excluded felony offense.
2. I, John J. Matos, attest that I do not currently have an establishment agent registration card OR I do and this is the registration number: 1600004940.
3. I, John J. Matos, attest that I have not had a marijuana establishment agent registration card revoked.
4. I, John J. Matos, attest that I am in compliance with my court order for support of a child OR I am not under any court orders.

Signature of Applicant: _____ Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Applicant Dispense/Divert Pledge Form

All new agent registration and renewal applications for establishment agent registration cards must pledge to the following:

1. Not to dispense or divert marijuana or marijuana products to unauthorized persons.

Print, sign and submit this form with your agent card application packet.

Name of Applicant: John J. Matos DOB: [redacted] SSN (optional): [redacted]

Mailing Address of Applicant: [redacted]

City: [redacted] State: [redacted] Zip: [redacted]

I, John J. Matos, pledge not to dispense or otherwise divert marijuana to any person who is not authorized to possess marijuana in accordance with provisions of Nevada Revised Statute 453A and/or NRS 453D.

Signature of Applicant: _____ Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Photograph and Signature

Affix agent photograph and sign in the appropriate boxes below.

Photograph

The applicant will need to obtain a standard United States passport photograph that is 2 inches in both height and width. These can be obtained at many United State Post Offices as well as private establishments (Walgreens, etc.). Glue (or affix in some manner other than tape) the photograph inside of the marks to the right.

Signature

Applicant signature needs to be entered into the box to the right. The box is defined by the horizontal and vertical marks. This allows the signature to be scanned without a black border. The box is 1 inch high and 3 inches in length. Sign using a black pen.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and /or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.
In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Matos, John, Jay
(PRINT: Last, First, Middle)

Address: [redacted]

Applicant's Signature: _____

Date: 9/20/18

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Marijuana Enforcement Division

Agent Applicant Fingerprint Submission Form

Provide this form to the fingerprint technician at the time fingerprints are taken. Submit the completed, stamped form with your agent card application.

Fingerprint technician: Please ensure that you see a photo ID for identity verification purposes prior to fingerprinting. Also, please enter the required information in the lower right hand corner and return this form to the applicant for submission to the Marijuana Enforcement Division.

Instructions

Please type or print legibly. All fingerprints must go to DPS for processing. Electronic submission to DPS is REQUIRED unless being fingerprinted outside of Nevada.

Applicant

NAME (FIRST MIDDLE LAST): John Jay Matos

SOCIAL SECURITY NUMBER (optional): [redacted]

PHYSICAL ADDRESS LINE 1 (ADDRESS ON GOVERNMENT ID): [redacted]

CITIZENSHIP: U.S. Citizen

PHYSICAL ADDRESS LINE 2:

MOBILE PHONE NUMBER: [redacted]

PHYSICAL CITY, STATE, ZIPCODE (TOWN, CITY, PROVINCE, POSTAL CODE): [redacted]

HOME PHONE NUMBER:

EYE COLOR: Brown

HAIR COLOR: Brown

WEIGHT (LBS): 245 lbs.

ETHNICITY: White

GENDER: Male

HEIGHT (FT-IN): 5' 7"

RACE: Hispanic

PLACE OF BIRTH: New York, NY

DATE OF BIRTH: 2/20/1968

Establishment Information (If owner, officer or board member)

ESTABLISHMENT NAME: Nevcann

ESTABLISHMENT CODE:

CERTIFICATE:

ESTABLISHMENT TYPE: Dispensary

Reason Fingerprinted

MNU (Account #): 152108 ORI: NV0131700

Medical Marijuana Establishments (Check one)

- [ ] Current Owner/Officer/Board Member — NRS 453A.322
- [x] Prospective Owner/Officer/Board Member — NRS 453A.334
- [ ] Employee/Contractor/Volunteer — NRS 453A.332

Recreational Marijuana Establishments (Check one box if establishment is both Recreational and Medical, or for Distributors)

- [ ] Current Owner/Officer/Board Member — NRS 453D
- [x] Prospective Owner/Officer/Board Member — NRS 453D
- [ ] Employee/Contractor/Volunteer — NRS 453D

NOTE: If you work, or will work for a "Dual Licensee" establishment (Medical and Recreational) you must submit two fingerprint cards; one with the "Reason Fingerprinted" of NRS 453A, and one with NRS 453D. You will also have to pay DPS's processing fee for each card.

FINGERPRINT AGENCY STAMP:
Fingerprints Processed by
B&D Fingerprinting Services, LLC
800 N Rainbow Blvd., Ste 175.
Las Vegas, NV 89107
(702) 485-5256
info@bdfingerprinting.com

FINGERPRINT TECHNICIAN'S SIGNATURE:

TCN#: NVPS1E5015000A MED

DATE: 9-19-18

NVPS1E5015001A REC

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

On Demand Promissory Note

Amount $ 2,500,000.00 Date September 19, 2018

For value received, James Cavanaugh Dillingham (the borrower), on June 8, 2016 promises to pay in full to the order of Patricia Cavanaugh Dillingham (the lender), in 60 monthly installments at an interest rate of 12%, amortized over 60 months.

Terms of Repayment

A. Payment. Loan to be paid in 60 monthly installments of commencing on 30 days after License or Licenses issued TBD. In the occurrence that License is issued after 2019 payment will commence on February 1st, 2019.

B. Total amount to be paid back is $ 2,800,000.00 Principle of $2,500,000.00 and interest of $300,000.00.

Prepayment

The borrower reserves the right to prepay this note (in whole or in part) prior to the due date with no prepayment penalty.

Collection Costs

If any payment obligation under this note is not paid when due, the Borrower promises to pay all costs of collection, including reasonable attorneys fees, whether or not a lawsuit is commenced as part of the collection process.

Default

If any of the following events of default occur, this note and any other obligations to the borrower or the lender, shall become due and payable.

1. The failure of borrower to pay the principal and any accrued interest when due.
2. The liquidation, dissolution, incompetency or death of the borrower or lender.
3. The filing of Bankruptcy proceedings involving the borrower as a debtor.
4. The insolvency of the borrower.
5. A misrepresentation by the borrower to the lender for the purposes of extending credit.

Governing Law

This note shall be construed in accordance with the laws of the state of Nevada.

In witness Whereof, this agreement has been executed and delivered in the in the manner prescribed by law as of the date first written above.

Borrower:

By: James C. Dillingham James Cavanaugh Dillingham

Lender:
BY: P C Dillingham Patricia Cavanaugh Dillingham

WELLS FARGO

Portfolio By Wells Fargo Private Bank

Questions? Please contact us:

The Private Bank Service Team
Available 24 hours a day, 7 days a week
Telecommunications Relay Services calls accepted
Phone: **1-877-646-8560** , *TTY:* 1-800-600-4833

Online: wellsfargo.com

Write: Wells Fargo Private Bank
P.O. Box 4056
Concord, CA 94524-4056

PATRICIA C DILLINGHAM

[redacted]

August 31, 2018

Total assets: **$2,501,064.53**

[redacted]

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Private Bank Interest Checking

Primary Checking account in your Portfolio by Wells Fargo Private Bank relationship

Activity summary

[redacted]

Balance on 8/31	**$2,501,064.53**

Account number: [redacted]

PATRICIA C DILLINGHAM

Wells Fargo Bank, N.A. (Member FDIC)

CALIFORNIAaccount terms and conditions apply

Questions about your account: **1-877-646-8560**

Worksheet to balance your account and General Statement Policies can be found towards the end of this statement.

[redacted]

1190

On Demand Promissory Note

Amount $ 1,200,000.00 Date September 18, 2018

For value received, James Cavanaugh Dillingham (the borrower), on September 18, 2018 promises to pay in full to the order of William O. Dillingham III (the lender), in 120 monthly installments at an interest rate of 9%, amortized over 120 months.

Terms of Repayment

A. **Payment.** Loan to be paid in 120 monthly installments of commencing on January 1st, 2019.

B. **Total amount to be paid back is $1,308,000.00** Principle of $1,200,000.00 and interest of $108,000.00.

Prepayment

The borrower reserves the right to prepay this note (in whole or in part) prior to the due date with no prepayment penalty.

Collection Costs

If any payment obligation under this note is not paid when due, the Borrower promises to pay all costs of collection, including reasonable attorneys fees, whether or not a lawsuit is commenced as part of the collection process.

Default

If any of the following events of default occur, this note and any other obligations to the borrower or the lender, shall become due and payable.

1. The failure of borrower to pay the principal and any accrued interest when due.
2. The liquidation, dissolution, incompetency or death of the borrower or lender.
3. The filing of Bankruptcy proceedings involving the borrower as a debtor.
4. The insolvency of the borrower.
5. A misrepresentation by the borrower to the lender for the purposes of extending credit.

Governing Law

This note shall be construed in accordance with the laws of the state of Nevada.

In witness Whereof, this agreement has been executed and delivered in the in the manner prescribed by law as of the date first written above.

Borrower:

By: _____ JAMES Cavanaugh Dillingham

Lender:

By: _____ William O. Dillingham III

WELLS FARGO ADVISORS

SNAPSHOT [redacted]

WILLIAM DILLINGHAM III

AUGUST 1, 2018 - AUGUST 31, 2018
ACCOUNT NUMBER [redacted]

Progress summary

	THIS PERIOD	THIS YEAR
Opening value	$1,249,282.13	$1,231,132.59
[redacted]		
Closing value	**$1,255,874.39**	**$1,255,874.39**

As a Wells Fargo Advisors client, you can upgrade your investment a
Brokerage Cash Services at no additional cost. Brokerage Cash Services p
to convenient money movement options including mobile deposit services.
teller deposit services at Wells Fargo branch locations which are provided th
purpose Bank account. You'll have access to many more features and bene
manage your finances. It's as simple as talking with Your Financial Advis
today about Brokerage Cash Services.

[redacted]

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HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

[redacted]

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

Registered Agent: [redacted] Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date

[redacted] ida Secretary of State NRS 86 DLLC Articles

[redacted]

Other Authorized Signature

Nevada Secretary of State List ManorMem
Revised: 7-1-17

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[redacted]

Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

[redacted]

Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

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Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

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Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

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Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Doc ID: 91abceab3266d221a5c9d1845cf97f4a78c07e29

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

SHORT-FORM UNCONDITIONED CAPITAL COMMITMENT AGREEMENT

This Short-Form Unconditioned Capital Commitment Agreement memorializes the general terms of the long-form unconditioned capital loan agreement ("Agreement") between Red Earth LLC, whose address is [redacted] ("Company") and Paris Balaouras, whose address is [redacted] ("Creditor").

The Creditor hereby agrees to unconditionally lend Company up to two hundred thirty five thousand three hundred and four US Dollars ($235,304.00), representing the required capital to finance the commencement of new recreational retail marijuana store operations of Company, including but not limited to covering all construction, renovation and build-out expenses and on-going operational losses and expenses until Company becomes profitable in its operation of a recreational retail marijuana store, as such term is defined under Nevada law and regulations, in the State of Nevada, within a reasonable amount of time after the award of a conditional recreational retail marijuana store license from the Nevada Department of Taxation (the "Department").

This Agreement shall terminate if Company does not receive notice of a conditional recreational retail marijuana store license from the Department as part of the Department's July-September 2018 recreational retail marijuana store license application process, which such notice is expected no later than December 5, 2018. However, if Company does receive notice of award of a conditional recreational retail marijuana store license from the Department, then the Creditor's capital commitment hereunder shall then become immediately available to Company and shall become subject to Company' control.

If commercially necessary, Creditor will take all reasonable efforts to lend additional sums to Company under substantially similar terms as this Agreement to ensure the company's financial health and long-term operational viability.

Company will notify Creditor within twenty-four (24) hours of the Department's notice of its award or denial of the subject license.

The undersigned hereby attests that he understands and acknowledges the terms of this Agreement and agrees to abide by the terms thereof.

By: CREDITOR

Paris Balaouras

9/14/18

Date

SHORT-FORM UNCONDITIONED CAPITAL COMMITMENT AGREEMENT

This Short-Form Unconditioned Capital Commitment Agreement memorializes the general terms of the long-form unconditioned capital loan agreement ("Agreement") by and between Red Earth LLC, whose address is [redacted] ("Company") and Prescott Management LLC, whose address is 3275 South Jones Blvd, Suite 104, Las Vegas, NV 89146 ("Creditor").

The Creditor hereby agrees to unconditionally lend Company up to One Million Two Hundred Eighteen Thousand Five Hundred and Twenty One US Dollars ($1,218,521.00), representing the required capital to finance the commencement of new recreational retail marijuana store operations of Company, including but not limited to covering all construction, renovation and build-out expenses and on-going operational losses and expenses until Company becomes profitable in its operation of a recreational retail marijuana store, as such term is defined under Nevada law and regulations, in the State of Nevada, within a reasonable amount of time after the award of a conditional recreational retail marijuana store license from the Nevada Department of Taxation (the "Department").

This Agreement shall terminate if Company does not receive notice of a conditional recreational retail marijuana store license from the Department as part of the Department's July-September 2018 recreational retail marijuana store license application process, which such notice is expected no later than December 5, 2018. However, if Company does receive notice of award of a conditional recreational retail marijuana store license from the Department, then the Creditor's capital commitment hereunder shall then become immediately available to Company and shall become subject to Company' control.

If commercially necessary, Creditor will take all reasonable efforts to lend additional sums to Company under substantially similar terms as this Agreement to ensure the company's financial health and long-term operational viability.

Company will notify Creditor within twenty-four (24) hours of the Department's notice of its award or denial of the subject license.

The undersigned hereby attests that he understands and acknowledges the terms of this Agreement and agrees to abide by the terms thereof.

By: CREDITOR

Paris Balaouras

9/19/18

Date

SHORT-FORM UNCONDITIONED CAPITAL COMMITMENT AGREEMENT

This Short-Form Unconditioned Capital Commitment Agreement memorializes the general terms of the long-form unconditioned capital loan agreement ("Agreement") by and between Red Earth LLC, whose address is [redacted] ("Company") and Icon Management LLC, whose address is 3275 South Jones Blvd, Suite 104, Las Vegas, NV 89146 ("Creditor").

The Creditor hereby agrees to unconditionally lend Company up to Seventy Eight Thousand Twenty US Dollars ($78,020.00), representing the required capital to finance the commencement of new recreational retail marijuana store operations of Company, including but not limited to covering all construction, renovation and build-out expenses and on-going operational losses and expenses until Company becomes profitable in its operation of a recreational retail marijuana store, as such term is defined under Nevada law and regulations, in the State of Nevada, within a reasonable amount of time after the award of a conditional recreational retail marijuana store license from the Nevada Department of Taxation (the "Department").

This Agreement shall terminate if Company does not receive notice of a conditional recreational retail marijuana store license from the Department as part of the Department's July-September 2018 recreational retail marijuana store license application process, which such notice is expected no later than December 5, 2018. However, if Company does receive notice of award of a conditional recreational retail marijuana store license from the Department, then the Creditor's capital commitment hereunder shall then become immediately available to Company and shall become subject to Company' control.

If commercially necessary, Creditor will take all reasonable efforts to lend additional sums to Company under substantially similar terms as this Agreement to ensure the company's financial health and long-term operational viability.

Company will notify Creditor within twenty-four (24) hours of the Department's notice of its award or denial of the subject license.

The undersigned hereby attests that he understands and acknowledges the terms of this Agreement and agrees to abide by the terms thereof.

By: CREDITOR

Paris Balaouras

9/14/18
Date

UNCONDITIONED CAPITAL COMMITMENT AGREEMENT (Short-Form)

This Short-From Unconditioned Capital Commitment Agreement memorializes the general terms of the long-form unconditioned capital loan agreement ("Agreement") by and between Red Earth, LLC/Paris Balaouras whose address is [redacted] ("Company") and Pacific Investments and Acquisition, LLC, whose address is 6465 South 3000 East, Suite 101, Salt Lake City, UT 84121 ("Creditor"). The Creditor hereby agrees to unconditionally lend Company up to ten million US Dollars ($10,000,000), representing the required capital to finance the commencement of a new recreational retail marijuana store operations of Company, including but not limited to covering all construction, renovation and build-out expenses and on-going operational losses and expenses until Company becomes profitable in its operation of a recreational retail marijuana store, as such term is defined under Nevada law and regulations, in the State of Nevada, within a reasonable amount of time after the award of a conditional recreational retail marijuana store license from the Nevada Department of Taxation (the "Department"). This Agreement shall terminate if Company does not receive notice of a conditional recreational retail marijuana store license from the Department as part of the Department's July-September 2018 recreational retail marijuana store license application process, which such notice is expected no later than December 5, 2018. However, if Company does receive notice of award of a conditional recreational retail marijuana store license from the Department, then the Creditor's capital commitment hereunder shall then become immediately available to Company and shall become subject to Company control. If commercially necessary, Creditor will take all reasonable efforts to lend additional sums to Company under substantially similar terms as this Agreement to ensure the Company's financial health and long-term operational viability. Notwithstanding the above, Creditor reserves the right to review the terms and conditions of potential award and accept or reject same. Creditor may unilaterally terminate pending loan or modify terms and conditions of loan and said loan may be unconditionally changed by Creditor. Company will notify Creditor within twenty-four (24) hours of the Department's notice of its award or denial of the subject license. The undersigned hereby attests that he understands and acknowledges the terms of this Agreement and agrees to abide by the terms thereof.

Pacific Investments and Acquisition, LLC
By: Douglas K. Anderson, Manager

5.2.8.2. - *The source of those liquid assets.*

Wells Fargo Prime Checking

Activity summary

[redacted]

Balance on 8/31	$256,702.99

Account number: [redacted]

PARIS BALADURAS

Wells Fargo Bank, N.A. (Member FDIC)

CALIFORNIA account terms and conditions apply

Questions about your account: 1-800-742-4932

Worksheet to balance your account and General Statement Policies can be found towards the end of this statement.

[redacted]

WELLS FARGO

wellsfargo.com

09/19/2018

Spring Mountain & Jones
3555 S Jones Blvd
Las Vegas, NV 89103

Andreas Boutsikakis
[redacted]

Dear To Whom It May Concern:

This letter is verification that the Customer named above has the following deposit accounts with Wells Fargo.

Account Number	Date Opened	Current Balance*
[redacted]	12/29/2017	1,218,521.83
	03/06/2017	78,020.42

*The Balance is the opening available balance as of the date of this letter but such balance does not include any uncollected items and/or amounts that have not yet been posted to such account as of the date hereof. The foregoing is not, and should not at any time or in any way be construed as a guaranty of future account balances.

This letter is strictly confidential and the information herein is solely for Customer's lawful use. This letter is given in good faith, without legal liability. Wells Fargo does not represent and warrant that this information is complete or accurate and any errors or omissions in the information shall not be a basis for a claim against Wells Fargo. Wells Fargo does not undertake or accept any duty, responsibility, liability or obligation that may arise from providing this letter and/or for any reliance being placed upon information in this letter or for any loss or damage that may result from reliance being placed upon it. Wells Fargo does not assume any duty or obligation to you or any other person or entity by providing this information and this information is subject to change without notice to you. Wells Fargo does not undertake any duty to update you in the event any deposit account relationship referenced above is, or is the process of being, modified, terminated or cancelled. By requesting and utilizing this information, you agree to indemnify, defend, and hold Wells Fargo harmless from and against any claim resulting from the disclosure and use of the information by you, or from the breach by you of any agreement, representation or warranty herein.

If you have any questions, please contact me at: 702-362-7657.

A representative will be happy to assist you, as follows:

Monday – Thursday:	9:00 AM - 5:00 PM Pacific
Friday:	9:00 AM - 6:00 PM Pacific
Saturday:	10:00 AM - 2:00 PM Pacific

Thank you. We appreciate your business.

Sincerely,

Juan Hernandez
Business Specialist
Wells Fargo Bank, N.A.

Together we'll go far

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DSG4236 (Rev 03 - 01/17)

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Intraday Summary

Collapse

Report Date: Jul 09, 2018 generated Jul 09, 2018 3:12 PM EDT

Total Balances

Opening Ledger	[redacted]	Current Ledger (Real Time)	Current Available (Real Time)
$10,716,665.29		**$10,714,116.84**	**$10,714,116.84**

Bank: Keybank National Association [redacted]

Account Name	Account #	Opening Ledger	Total Credits	Total Debits	Holds	Uncollected	Current Ledger	Current Avail
Private Capital Group Inc	[redacted]	$7,878,681.28	[redacted]				$7,878,681.28	$7,878,681
Reef-Pcg LLC 5852	[redacted]	$2,837,984.01					$2,835,435.56	$2,835,435
	Bank Totals:	**$10,716,665.29**					**$10,714,116.84**	**$10,714,116**

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

5.2.9. **Tab IX** – *Evidence of taxes paid; other beneficial financial contributions*

Evidence of the amount of taxes paid and/or other beneficial financial contributions made to the State of Nevada or its political subdivisions within the last five years by the applicant or the persons who are proposed to be owners, officers or board members of the establishment must be included in this tab.

Red Earth Taxes & Fees Paid Spreadsheet - Nevada Department of Taxation

Date	Company	Amount	Reason	Type	Bank	Account No.	Paid To The Order Of	Memo
06/25/18	Prescott Management LLC	$30,000.00	Recreational Cultivation License Fee	Check No.: 20071	Wells Fargo	[redacted]	Nevada State Dept of Taxation	Red Earth LLC Lic#CO12 TID#103488734
	Prescott Management LLC	$5,000.00	Application Fee	Check No.: 20070	Wells Fargo	[redacted]	Nevada State Dept of Taxation	Red Earth LLC Lic#CO12 TID#103488734
07/09/18	Prescott Management LLC	$10,000.00	LIC# M66-00023 Fee: Prv (Initial - Marijuana)	Check No.: 20078	Wells Fargo	[redacted]	The City of Las Vegas	M66-00023
	Prescott Management LLC	$30,000.00	Square Footage Of Grow Canopy	Check No.: 20077	Wells Fargo	[redacted]	The City of Las Vegas	M66-00023
08/10/18	Prescott Management LLC	$1,000.00	Medical Cultivation Establishment Renewal Fee	Check No.: 20109	Wells Fargo	[redacted]	Nevada State Dept of Taxation	Red Earth LLC MMEID#CO12 TID#103488734

Acres Medical, LLC Taxes & Fees Paid - Nevada Department of Taxation

Date	Company	Amount	Reason	Type	Owner %	Claiming	Paid to Order of	Memo
07/21/14	Acres Medical, LLC	$6,280.00		Check	9.80%	$615.44	City of Las Vegas	
	Acres Medical, LLC	$6,280.00		Check	9.80%	$615.44	City of Las Vegas	
	Acres Medical, LLC	$6,280.00		Check	9.80%	$615.44	City of Las Vegas	
12/14/15	Acres Medical, LLC	$344.00		Bill Pmt - Check	9.80%	$33.71	City of Las Vegas	Permit
	Acres Medical, LLC	$550.00		Bill Pmt - Check	9.80%	$53.90	City of Las Vegas	Permit
12/01/16	Acres Medical, LLC	$1,772.00		Bill Pmt - Check	9.80%	$173.66	City of Las Vegas	Change Of Contractor Permit
5/1/17	Acres Medical, LLC	$12,500.00		Check	9.80%	$1,225.00	City of Las Vegas	Licensing Fees - Dispensary
	Acres Medical, LLC	$833.33		Check	9.80%	$81.67	City of Las Vegas	Licensing Fees - Production
5/17/17	Acres Medical, LLC	$62,500.00		Check	9.80%	$6,125.00	City of Las Vegas	Licensing Application Dispensary, Production, Cultivation
	Acres Medical, LLC	$4,166.67		Check	9.80%	$408.33	City of Las Vegas	
	Acres Medical, LLC	$1,080.00		Check	9.80%	$105.84	City of Las Vegas	
	Acres Medical, LLC	$1,080.00		Check	9.80%	$105.84	City of Las Vegas	
7/14/17	Acres Medical, LLC	$2,886.83		Bill Pmt - Check	9.80%	$282.91	City of Las Vegas	Medical Marijuana Business License Renewal
	Acres Medical, LLC	$5,000.00		Bill Pmt - Check	9.80%	$490.00	City of Las Vegas	Medical Marijuana Business License Renewal
2/26/18	Acres Medical, LLC	$57,050.42		Check	9.80%	$5,590.94	City of Las Vegas	Retail and Medical Business License Renewal - Dispensary
4/12/18	Acres Medical, LLC	$1,709.00		Check	9.80%	$167.48	City of Las Vegas	Retail Marijuana Business License Renewal - Production
11/2/15	Acres Medical, LLC	$5,000.00		Bill Pmt - Check	9.80%	$490.00	City of Las Vegas-Compliance Permit	Permits - Cultivation
	Acres Medical, LLC	$5,000.00		Bill Pmt - Check	9.80%	$490.00	City of Las Vegas-Compliance Permit	Permits - Production
11/29/16	Acres Medical, LLC	$5,000.00		Check	9.80%	$490.00	City of Las Vegas-Compliance Permit	Cultivation Compliance Permit
	Acres Medical, LLC	$5,000.00		Check	9.80%	$490.00	City of Las Vegas-Compliance Permit	Production Compliance Permit
	Acres Medical, LLC	$5,000.00		Check	9.80%	$490.00	City of Las Vegas-Compliance Permit	Dispensary Compliance Permit
9/23/16	Acres Medical, LLC	$646.15		Liability Check	9.80%	$63.32	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 3rd Qtr 2016
12/30/16	Acres Medical, LLC	$372.92		Liability Check	9.80%	$36.55	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 4th Qtr 2016
2/24/17	Acres Medical, LLC	$1,349.28		Liability Check	9.80%	$132.23	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 1st Qtr 2017
7/1/17	Acres Medical, LLC	$7,070.81		Liability Check	9.80%	$692.94	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 2nd Qtr 2017
9/27/17	Acres Medical, LLC	$7,097.58		Liability Check	9.80%	$695.56	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 3rd Qtr 2017
12/29/17	Acres Medical, LLC	$5,156.50		Liability Check	9.80%	$505.34	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 4th Qtr 2017
6/14/18	Acres Medical, LLC	$9,498.16		Liability Check	9.80%	$930.82	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 1st Qtr 2018
7/6/17	Acres Medical, LLC	$2,858.25		Bill Pmt - Check	9.80%	$280.11	Dept of Public Behavioral Health	Pre-Opening Inspection Disp. & Prod. Invoice 1178, 1179 & 1056
1/10/18	Acres Medical, LLC	$2,775.00		Bill Pmt - Check	9.80%	$271.95	Dept of Public Behavioral Health	MME Routine Inspection Invoice 1127
5/30/17	Acres Medical, LLC	$12.00		Check	9.80%	$1.18	Nevada Dept of Taxation	EIN 46-5403310
	Acres Medical, LLC	$12.00		Check	9.80%	$1.18	Nevada Dept of Taxation	EIN 46-5395502
7/14/17	Acres Medical, LLC	$2,294.11		Check	9.80%	$224.82	Nevada Dept of Taxation	Retail Marijuana Tax - June 2017
7/31/17	Acres Medical, LLC	$6,936.41		Check	9.80%	$679.77	Nevada Dept of Taxation	Sales & Use Tax - June 2017
8/29/17	Acres Medical, LLC	$400.00		Check	9.80%	$39.20	Nevada Dept of Taxation	
9/1/17	Acres Medical, LLC	$24,804.06		Bill Pmt - Check	9.80%	$2,430.80	Nevada Dept of Taxation	Retail Marijuana Tax - July 2017
	Acres Medical, LLC	$24,303.72		Bill Pmt - Check	9.80%	$2,381.76	Nevada Dept of Taxation	Sales & Use Tax - July 2017
10/16/17	Acres Medical, LLC	$1,500.00		Check	9.80%	$147.00	Nevada Dept of Taxation	
10/31/17	Acres Medical, LLC	$108,181.05		Bill Pmt - Check	9.80%	$10,601.74	Nevada Dept of Taxation	Retail Marijuana Tax - July, Aug, Sept Sales & Use July, Aug, & Sept 2017
11/30/17	Acres Medical, LLC	$4,867.23		Bill Pmt - Check	9.80%	$476.99	Nevada Dept of Taxation	Sales & Use Tax - Sept 2017
12/11/17	Acres Medical, LLC	$22,094.47		Bill Pmt - Check	9.80%	$2,165.26	Nevada Dept of Taxation	Retail Marijuana Tax - Oct. 2017
	Acres Medical, LLC	$22,060.59		Bill Pmt - Check	9.80%	$2,161.94	Nevada Dept of Taxation	Sales & Use Tax - Oct 2017
1/5/18	Acres Medical, LLC	$22,542.30		Bill Pmt - Check	9.80%	$2,209.15	Nevada Dept of Taxation	Retail Marijuana Tax - Nov 2017
	Acres Medical, LLC	$22,239.94		Bill Pmt - Check	9.80%	$2,179.51	Nevada Dept of Taxation	Sales & Use Tax - Nov 2017
1/10/18	Acres Medical, LLC	$1,270.75		Bill Pmt - Check	9.80%	$124.53	Nevada Dept of Taxation	MME Routine Inspection Invoice 1304 & 1658
1/17/18	Acres Medical, LLC	$1,300.00		Bill Pmt - Check	9.80%	$127.40	Nevada Dept of Taxation	MME Change of Location Invoice 1632
2/26/18	Acres Medical, LLC	$19,666.78		Bill Pmt - Check	9.80%	$1,927.34	Nevada Dept of Taxation	Sales & Use Tax Dec 2017
	Acres Medical, LLC	$21,962.14		Bill Pmt - Check	9.80%	$2,152.29	Nevada Dept of Taxation	Retial Marijuana Tax - Dec 2017
	Acres Medical, LLC	$7,236.09		Bill Pmt - Check	9.80%	$709.14	Nevada Dept of Taxation	Modified Business Tax - 2nd, 3rd, 4th Qtr 2017
3/22/18	Acres Medical, LLC	$23,326.00		Bill Pmt - Check	9.80%	$2,285.95	Nevada Dept of Taxation	Retail Marijuana Tax - Jan 2018
	Acres Medical, LLC	$22,977.78		Bill Pmt - Check	9.80%	$2,251.82	Nevada Dept of Taxation	Sales & Use Tax - Jan 2018

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4/20/18	Acres Medical, LLC	$56,929.28		Bill Pmt - Check	9.80%	$5,579.07	Nevada Dept of Taxation	Retail Marijuana Tax - Feb 2018 Sales & Use - Feb 2018
5/8/18	Acres Medical, LLC	$150.00		Check	9.80%	$14.70	Nevada Dept of Taxation	Agent Cards
5/14/18	Acres Medical, LLC	$159.25		Check	9.80%	$15.61	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$84.25		Check	9.80%	$8.26	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$375.00		Check	9.80%	$36.75	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$150.00		Check	9.80%	$14.70	Nevada Dept of Taxation	Agent Cards
5/15/18	Acres Medical, LLC	$300.00		Check	9.80%	$29.40	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$800.00		Check	9.80%	$78.40	Nevada Dept of Taxation	Business License
	Acres Medical, LLC	$150.00		Check	9.80%	$14.70	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$84.25		Check	9.80%	$8.26	Nevada Dept of Taxation	Agent Cards
5/16/18	Acres Medical, LLC	$1,250.00		Bill Pmt - Check	9.80%	$122.50	Nevada Dept of Taxation	Non-Compliant Advertising
5/17/18	Acres Medical, LLC	$75.00		Check	9.80%	$7.35	Nevada Dept of Taxation	Agent Cards
5/23/18	Acres Medical, LLC	$75.00		Check	9.80%	$7.35	Nevada Dept of Taxation	For Renee
5/29/18	Acres Medical, LLC	$41,028.76		Bill Pmt - Check	9.80%	$4,020.82	Nevada Dept of Taxation	Retail Marijuana Tax - March 2019
	Acres Medical, LLC	$38,599.47		Bill Pmt - Check	9.80%	$3,782.75	Nevada Dept of Taxation	Sales & Use Tax March 2019
	Acres Medical, LLC	$100.00		Check	9.80%	$9.80	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$50.00		Check	9.80%	$4.90	Nevada Dept of Taxation	Agent Cards
	Acres Medical, LLC	$84.25		Check	9.80%	$8.26	Nevada Dept of Taxation	Agent Cards
5/30/18	Acres Medical, LLC	$160.00		Check	9.80%	$15.68	Nevada Dept of Taxation	Agent Cards
6/5/18	Acres Medical, LLC	$3,591.99		Bill Pmt - Check	9.80%	$352.02	Nevada Dept of Taxation	Modified Business Tax - 1st Qtr 2019
	Acres Medical, LLC	$42,508.70		Bill Pmt - Check	9.80%	$4,165.85	Nevada Dept of Taxation	Retail Marijuana Tax- April 2019
6/6/18	Acres Medical, LLC	$450.00		Check	9.80%	$44.10	Nevada Dept of Taxation	Agent Cards
6/7/18	Acres Medical, LLC	$41,549.17		Bill Pmt - Check	9.80%	$4,071.82	Nevada Dept of Taxation	Sales & Use tax April 2019
6/11/18	Acres Medical, LLC	$75.00		Check	9.80%	$7.35	Nevada Dept of Taxation	Agent Cards

Acres Cultivation, LLC Taxes & Fees Paid - Nevada Department of Taxation

Date	Company	Amount	Reason	Type	Owner %	Claiming	Paid to Order of	Memo
4/1/15	Acres Cultivation, LLC	$500.00		Check	9.80%	$49.00	Amargosa Valley	Gold Sponorship & Booth
11/22/17	Acres Cultivation, LLC	$11,696.68		Bill Pmt - Check	9.80%	$1,146.27	Amargosa Valley	April 2017 thru Sept 2017 7LB
12/01/17	Acres Cultivation, LLC	$700.12		Bill Pmt - Check	9.80%	$68.61	Amargosa Valley	Oct 2017 7LB Payment
12/8/17	Acres Cultivation, LLC	$599.01		Bill Pmt - Check	9.80%	$58.70	Amargosa Valley	Nov 2017 7LB Payment
2/22/18	Acres Cultivation, LLC	$144.79		Bill Pmt - Check	9.80%	$14.19	Amargosa Valley	Jan 2017 7LB Payment
3/6/18	Acres Cultivation, LLC	$1,435.39		Bill Pmt - Check	9.80%	$140.67	Amargosa Valley	Feb 2017 7LB Payment
5/16/18	Acres Cultivation, LLC	$3,157.58		Bill Pmt - Check	9.80%	$309.44	Amargosa Valley	March and April 2018 7LB Payment
3/25/16	Acres Cultivation, LLC	$617.89		Liability Check	9.80%	$60.55	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 1st Qtr 2016
7/1/16	Acres Cultivation, LLC	$1,795.42		Liability Check	9.80%	$175.95	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 2nd Qtr 2016
9/23/16	Acres Cultivation, LLC	$1,093.41		Liability Check	9.80%	$107.15	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 3rd Qtr 2016
12/30/16	Acres Cultivation, LLC	$1,219.84		Liability Check	9.80%	$119.54	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 4th Qtr 2016
2/24/17	Acres Cultivation, LLC	$2,069.06		Liability Check	9.80%	$202.77	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 1st Qtr 2017
7/1/17	Acres Cultivation, LLC	$3,400.20		Liability Check	9.80%	$333.22	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 2nd Qtr 2017
9/27/17	Acres Cultivation, LLC	$4,543.14		Liability Check	9.80%	$445.23	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 3rd Qtr 2017
12/29/17	Acres Cultivation, LLC	$6,738.66		Liability Check	9.80%	$660.39	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 4th Qtr 2017
6/14/18	Acres Cultivation, LLC	$10,006.42		Liability Check	9.80%	$980.63	Dept of Employment, Training & Rehabilita	Unemployment & Career Enhancement - 1st Qtr 2018
6/21/16	Acres Cultivation, LLC	$6,000.00		Bill Pmt - Check	9.80%	$588.00	Dept Public And Behavioral Health	Initial Operating Fee's - Co13, PO12
10/13/16	Acres Cultivation, LLC	$1,370.00		Bill Pmt - Check	9.80%	$134.26	Dept Public And Behavioral Health	MME Pre - Opening Inspection and Review Invoices 566, 568, 569
9/12/17	Acres Cultivation, LLC	$1,616.44		Bill Pmt - Check	9.80%	$158.41	Dept Public And Behavioral Health	MME Prorated Registration Renewal Fee SFY18 Invoices 8006 & 8104
12/22/17	Acres Cultivation, LLC	$5,661.00		Bill Pmt - Check	9.80%	$554.78	Dept Public And Behavioral Health	MME Routine Inspection Invoices 741, 737, 913, 1093, 1577, 1578
	Acres Cultivation, LLC	$4,307.99		Bill Pmt - Check	9.80%	$422.18	Dept Public And Behavioral Health	MME Routine Inspection Invoices 1098, 1027, WMT Penalty and Interest
5/31/17	Acres Cultivation, LLC	$15,000.00		Check	9.80%	$1,470.00	Nevada Dept of Taxation	MME - Production License
	Acres Cultivation, LLC	$35,000.00		Check	9.80%	$3,430.00	Nevada Dept of Taxation	MME - Cultivation License
7/14/17	Acres Cultivation, LLC	$5,773.65		Check	9.80%	$565.82	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax June 2017
10/30/17	Acres Cultivation, LLC	$4,668.08		Bill Pmt - Check	9.80%	$457.47	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Sept 2017
11/29/17	Acres Cultivation, LLC	$5,000.00		Check	9.80%	$490.00	Nevada Dept of Taxation	
	Acres Cultivation, LLC	$5,000.00		Check	9.80%	$490.00	Nevada Dept of Taxation	
12/11/17	Acres Cultivation, LLC	$20,098.54		Bill Pmt - Check	9.80%	$1,969.66	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Oct . 2017
1/5/18	Acres Cultivation, LLC	$16,491.47		Bill Pmt - Check	9.80%	$1,616.16	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Nov . 2017
2/28/18	Acres Cultivation, LLC	$8,461.05		Bill Pmt - Check	9.80%	$829.18	Nevada Dept of Taxation	AC - Modified Business Tax 2nd, 3rd, 4th 2016 1st, 2nd, 3rd, 4th 2017
	Acres Cultivation, LLC	$5,599.75		Bill Pmt - Check	9.80%	$548.78	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Jan. 2018
4/20/18	Acres Cultivation, LLC	$45,270.74		Bill Pmt - Check	9.80%	$4,436.53	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Feb. 2018
6/1/18	Acres Cultivation, LLC	$55,038.82		Bill Pmt - Check	9.80%	$5,393.80	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax Mar. 2018
6/5/18	Acres Cultivation, LLC	$3,953.08		Bill Pmt - Check	9.80%	$387.40	Nevada Dept of Taxation	AC - Modified Business Tax 1st Qtr 2018
	Acres Cultivation, LLC	$27,740.48		Bill Pmt - Check	9.80%	$2,718.57	Nevada Dept of Taxation	AC - Wholesale Marijuana Tax April 2018
2/6/18	Acres Cultivation, LLC	$5,300.00		Bill Pmt - Check	9.80%	$519.40	Nye County Assessor	Personal Property Tax (Equipment) Parcel #019-751-03
2/13/18	Acres Cultivation, LLC	$269.26		Bill Pmt - Check	9.80%	$26.39	Nye County Assessor	Personal Property Tax (Equipment) Parcel #019-751-03
5/3/17	Acres Cultivation, LLC	$1,500.00		Bill Pmt - Check	9.80%	$147.00	Nye County	Special Use Permit Application

8/2/17	Acres Cultivation, LLC	$5,000.00		Check	9.80%	$490.00	Nye County	Licensing Cultivation and Production $2,500 each
	Acres Cultivation, LLC	$3,069.15		Check	9.80%	$300.78	Nye County	June 2017 Marijuana Sales
11/8/17	Acres Cultivation, LLC	$3,329.58		Check	9.80%	$326.30	Nye County	June 2017 Marijuana Sales Addition & Sept Marijuana Sales
	Acres Cultivation, LLC	$10,000.00		Check	9.80%	$980.00	Nye County	5563
12/11/17	Acres Cultivation, LLC	$2,567.20		Bill Pmt - Check	9.80%	$251.59	Nye County	Oct 2017 Marijuana Sales
12/15/17	Acres Cultivation, LLC	$625.08		Bill Pmt - Check	9.80%	$61.26	Nye County	Sept 2017 Marijuana Sales
	Acres Cultivation, LLC	$2,140.01		Bill Pmt - Check	9.80%	$209.72	Nye County	Nov 2017 Marijuana Sales
3/5/18	Acres Cultivation, LLC	$750.00		Check	9.80%	$73.50	Nye County	Special Use permit Application
	Acres Cultivation, LLC	$525.00		Check	9.80%	$51.45	Nye County	Waiver
3/16/18	Acres Cultivation, LLC	$6,340.98		Bill Pmt - Check	9.80%	$621.42	Nye County	Jan and Feb 2018 Marijuana Sales
5/20/18	Acres Cultivation, LLC	$1,500.00		Bill Pmt - Check	9.80%	$147.00	Nye County	BOA - 1938
5/21/18	Acres Cultivation, LLC	$9,494.80		Bill Pmt - Check	9.80%	$930.49	Nye County	March and April 2018 Marijuana Sales
5/30/18	Acres Cultivation, LLC	$2,500.00		Bill Pmt - Check	9.80%	$245.00	Nye County	Med MJ Pro Renewal - Cultivation
	Acres Cultivation, LLC	$2,500.00		Bill Pmt - Check	9.80%	$245.00	Nye County	Med MJ Pro Renewal - Production
6/11/18	Acres Cultivation, LLC	$7,345.00		Bill Pmt - Check	9.80%	$719.81	Nye County	Permits

Red Earth Tax & Fee Total	$76,000.00
Acres Medical, LLC Taxes & Fees Total	$80,448.56
Acres Cultivation, LLC Taxes & Fees Total	$37,879.43
Total	**$194,327.99**

* Supporting Documents for Red Earth, LLC will include copies of the checks and receipts of Taxes & Fees that Red Earth, LLC has paid to State & Local Municipalities in the State of Nevada

* Supporting Documents for Acres Medical, LLC & Acres Cultivation, LLC will include a Letter from Paris Balaouras that states that he is 9.8% Owner of Acres Medical, LLC & Acres Cultivation, LLC and the Vendor QuickReport of the Acres Medical, LLC (July 21, 2014 through June 11, 2018) & Acres Cultivation (April 1, 2015 through June 11, 2018)

DLN:

Taxpayer ID: 1034887734

NEVADA DEPARTMENT OF TAXATION

CASH COLLECTION SHEET - MARIJUANA

Requested by: alvarenga, k

Date: 8/13/2018

Entity Name:
red Earth LLC

Paid By: ☐ Cash ☑ Check ☐ CC or MO

If paid by check:
Bank and Branch: Wellsfargo
Account No.: [redacted] Check No.: 20109

Tax Type	Loc #	# of lics	RED	Amount
C 012				$1,000.00

Application for Licensure

Total # of licenses: 0

Description	Amount
	0
License Fee / Loc #	
Medical Cultivation Establishment Renewal Fee:	1000.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
Misc. Fees	
Other:	
Total	$ 1,000.00

RECEIVED
AUG 14 2018
Department of Taxation
District III, Las Vegas

KA

MARIJUANA CASH COLLECTION SHEET
BND-CSH-02.02
Revised 5-11-17

CASH ONLY IF ALL CheckLock SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Prescott Management LLC
dba Top Rank
3275 S Jones Blvd. Ste 104
Las Vegas, NV 89146

WELLS FARGO BANK, NA
94-7074/3212

20109

08/10/2018

PAY TO THE ORDER OF Nevada State Dept of Taxation $ **1,000.00

One thousand and 00/100********** DOLLARS

Nevada State Dept of Taxation
1550 College Parkway, Suite 115
555 E Washington Ave
Carson City, NV 89706-7937

MEMO Red Earth LLC MMEID#C012 TID#1034887734

[redacted]

Details on Back.

Intuit® CheckLock™ Secure Check

0010-00062
SA001700

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CAUTION: IF ALL CheckTech™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

Prescott Management LLC
dba Top Rank
3275 S Jones Blvd. Ste 104
Las Vegas, NV 89146

WELLS FARGO BANK, NA
94-7074/3212

20109

08/10/2018

PAY TO THE ORDER OF Nevada State Dept of Taxation $ **1,000.00

One thousand and 00/100********** DOLLARS

Nevada State Dept of Taxation
1550 College Parkway, Suite 115
555 E Washington Ave
Carson City, NV 89706-7937

MEMO Red Earth LLC MMEID#C012 TID#1034887734

[redacted]

Prescott Management LLC 20109

08/10/2018 Nevada State Dept of Taxation

Medical License Renewal for Red Earth LLC C012 1,000.00

Prescott Management Red Earth LLC MMEID#C012 TID#1034887734 1,000.00

Prescott Management LLC 20109

08/10/2018 Nevada State Dept of Taxation

Medical License Renewal for Red Earth LLC C012 1,000.00

PAYMENT RECORD

Prescott Management Red Earth LLC MMEID#C012 TID#1034887734 1,000.00

DLN:

Taxpayer ID: 1034887734

NEVADA DEPARTMENT OF TAXATION

CASH COLLECTION SHEET - MARIJUANA

Requested by: Greg Deaver

Date: 6/25/2018

Entity Name:

Red Earth LLC

Paid By: ☐ Cash ☑ Check ☐ CC or MO

If paid by check:

Bank and Branch: Wells Fargo

Account No.: [redacted]

Check No.: 20070 / 20071

Tax Type	Loc #	# of lics	PED	Amount
Cultivation		1		$30,000.00
App Fee				$5,000.00
Misc. Fees				
				$35,000.00

Application for Licensure

Total # of licenses: 1

Description	Amount
	5000
Recreational Cultivation License Fee:	30000.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
	0.00
Total	$ 35,000.00

License Fee Loc #

Other:

MARIJUANA CASH COLLECTION SHEET
BND-CSH-02.02
Revised 5-11-17

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CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

1034887734

WELLS FARGO BANK, NA
94-7074/3212

20071

Prescott Management LLC
dba Top Rank
3275 S Jones Blvd. Ste 104
Las Vegas, NV 89146

6/22/2018

PAY TO THE ORDER OF Nevada State Dept of Taxation $ **30,000.00

Thirty Thousand and 00/100********** DOLLARS

Nevada State Dept of Taxation
1550 College Parkway, Suite 115
555 E Washington Ave
Carson City, NV 89706-7937

MEMO Red Earth LLC Lic#C012 TIC#103488734

[redacted]

Details on Back.

Intuit® CheckLock™ Secure Check

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING

1034887734

WELLS FARGO BANK, NA
94-7074/3212

20070

Prescott Management LLC
dba Top Rank
3275 S Jones Blvd. Ste 104
Las Vegas, NV 89146

6/22/2018

PAY TO THE ORDER OF Nevada State Dept of Taxation $ **5,000.00

Five Thousand and 00/100********** DOLLARS

Nevada State Dept of Taxation
1550 College Parkway, Suite 115
555 E Washington Ave
Carson City, NV 89706-7937

MEMO Red Earth LLC Lic#C012 TID#1034887734

[redacted]

Details on Back.

Intuit® CheckLock™ Secure Check

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Prescott Management LLC
Nevada State Dept of Taxation 6/22/2018 20071

Rec Cultivation License - Red Earth 30,000.00

Prescott Management Red Earth LLC Lic#C012 TIC#103488734 30,000.00

Prescott Management LLC
Nevada State Dept of Taxation 6/22/2018 20071

Rec Cultivation License - Red Earth 30,000.00

PAYMENT RECORD

Prescott Management Red Earth LLC Lic#C012 TIC#103488734 30,000.00

Prescott Management LLC
Nevada State Dept of Taxation 6/22/2018 20070

Rec License for Red Earth LLC 5,000.00

Prescott Management Red Earth LLC Lic#C012 TID#1034887734 5,000.00

Prescott Management LLC
Nevada State Dept of Taxation 6/22/2018 20070

Rec License for Red Earth LLC 5,000.00

PAYMENT RECORD

Prescott Management Red Earth LLC Lic#C012 TID#1034887734 5,000.00

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

7/9/2018 16:16

Register ID: ASCARPELLI
Cashier: 989291
Tran Date: 7/9/2018 4:15:45 PM
Tran # 752821
Payer: Red Earth LLC

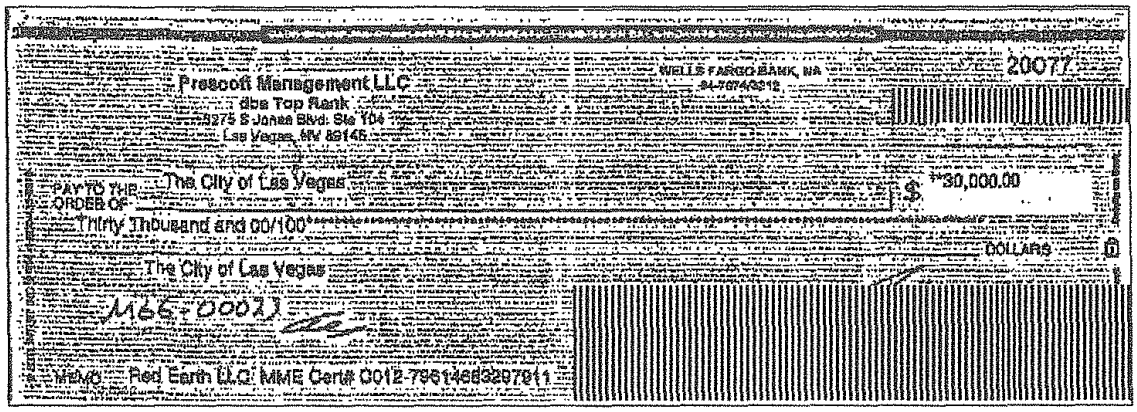
DESCRIPTION	AMT DUE	AMT PAID
LIC# M66-00023		
Fee: Prv(Initial - Marijuana)	$10,000.00	$10,000.00
CHECK #20078		$10,000.00
Subtotal:		$10,000.00
Tax:		$0.00
Total:		$10,000.00
Payment:		$10,000.00
Change:		$0.00

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Skip to main content

Check Details

Check Number	20077
Date Posted	07/10/18
Check Amount	$30,000.00


Prescott Management LLC
dba Top Rank
9275 S Jones Blvd. Ste 104
Las Vegas, NV 89145
WELLS FARGO BANK, NA
20077
PAY TO THE ORDER OF The City of Las Vegas $ **30,000.00
Thirty Thousand and 00/100**********
DOLLARS
The City of Las Vegas
M65-00021
Memo Red Earth LLC MME Cert# C012-7961468329791 1

For your security, information like account numbers, signatures, and the ability to view the backs of checks have been removed from the images.
You can see full or partial fronts and backs of the images by using the link at the top of the window.

Equal Housing Lender

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Department of Taxation

Form TXR-030.01
Revised 08/09/2016

Nevada Commerce Tax Return

Tax ID No 1 0 3 4 8 8 7 7 3 4 Or NVBID N V

Business Entity NAICS code category 11 - agriculture, forestry, fishi 0 1 1 For the taxable year 07/01/2017 through 06/30/2018

Business Entity legal name Red Earth LLC

Business Entity address [redacted]

☑ I declare that the Gross Revenue from engaging in business in Nevada of the above Business Entity did not exceed $4,000,000 during the taxable year.

IF THE BOX ABOVE IS CHECKED, SKIP LINES 1 THROUGH 35

☐ Final return ☐ Amended return ☐ Alternative situsing method ☐ Estimates used

Sitused to Nevada	**Gross Revenue from engaging in business in Nevada**			
	1	Sale of inventory	1	
	2	Service performance	2	
	3	Rents, royalties and leases	3	
	4	Interest income from credit sales and loans	4	
	5	Damages received from litigation for loss of business income	5	
	6	Insurance proceeds for loss of business income	6	
	7	Forgiven debt	7	
	8	Other revenue	8	
	9	Total Gross Revenue (Line 1 through Line 8)	9	
	10	Less $4,000,000 Threshold	10	(4,000,000.00)
	11	Adjusted Gross Revenue (Line 9 less Line 10)	11	

IF LINE 11 IS ZERO OR LESS, GO TO LINE 29 AND INPUT ZERO

To the extent included in revenue	**General Business Deductions**			
	12	Returns and refunds to customers	12	
	13	Bad debt	13	
	14	Distributions required by fiduciary duty or law	14	
	15	Distributions under certain written contracts	15	
	16	Reimbursement of certain expenses and advances from clients	16	
	17	Taxes collected from 3rd party and remitted to taxing authority	17	
	18	Other deductions	18	
	Industry Specific Deductions			
	19	Employee leasing deduction	19	
	20	Gaming deduction	20	
	21	Health care provider deduction	21	
	22	Insurance deduction	22	
	23	Liquor tax deduction	23	
	24	Mining deduction	24	
	25	US Armed Forces housing deduction	25	
	26	Total Deductions (Line 12 through Line 25)	26	
	27	Nevada Taxable Revenue (Line 11 less Line 26, but not less than $0)	27	
	28	Tax rate per NAICS code category	28	0 . 0 0 0 6 3
Tax liability	29	Commerce Tax due	29	
	30	Plus penalty	30	
	31	Plus interest	31	
	32	Plus liability established by Department	32	
	33	Less credit(s) approved by Department	33	
	34	Total amount due and payable (Line 29 through Line 33)	34	
	35	Amount remitted with the return	35	

☑ Under penalty of perjury, I certify that I have examined this return and to the best of my knowledge and belief it is true, correct and complete.

Business Entity authorized representative's signature:		Phone number:	[redacted]
Name and title:	Paris Balaouras Member	Date:	08/27/2018

For Department use only

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Nevada Department of Taxation

Form TXR-030.01
Revised 08/09/2016

Nevada Commerce Tax Return

Tax ID No 1 0 3 4 8 8 7 7 3 4 Or NVBID N V

Business Entity NAICS code category 11 - agriculture, forestry, fishi 0 1 1 For the taxable year 07/01/2016 through 06/30/2017

Business Entity legal name Red Earth LLC

Business Entity address [redacted]

☑ I declare that the Gross Revenue from engaging in business in Nevada of the above Business Entity did not exceed $4,000,000 during the taxable year.

IF THE BOX ABOVE IS CHECKED, SKIP LINES 1 THROUGH 35

☐ Final return ☐ Amended return ☐ Alternative situsing method ☐ Estimates used

Sitused to Nevada	**Gross Revenue from engaging in business in Nevada**			
	1	Sale of inventory	1	
	2	Service performance	2	
	3	Rents, royalties and leases	3	
	4	Interest income from credit sales and loans	4	
	5	Damages received from litigation for loss of business income	5	
	6	Insurance proceeds for loss of business income	6	
	7	Forgiven debt	7	
	8	Other revenue	8	
	9	Total Gross Revenue (Line 1 through Line 8)	9	
	10	Less $4,000,000 Threshold	10	(4,000,000.00)
	11	Adjusted Gross Revenue (Line 9 less Line 10)	11	
	IF LINE 11 IS ZERO OR LESS, GO TO LINE 29 AND INPUT ZERO			
To the extent included in revenue	**General Business Deductions**			
	12	Returns and refunds to customers	12	
	13	Bad debt	13	
	14	Distributions required by fiduciary duty or law	14	
	15	Distributions under certain written contracts	15	
	16	Reimbursement of certain expenses and advances from clients	16	
	17	Taxes collected from 3rd party and remitted to taxing authority	17	
	18	Other deductions	18	
	Industry Specific Deductions			
	19	Employee leasing deduction	19	
	20	Gaming deduction	20	
	21	Health care provider deduction	21	
	22	Insurance deduction	22	
	23	Liquor tax deduction	23	
	24	Mining deduction	24	
	25	US Armed Forces housing deduction	25	
	26	Total Deductions (Line 12 through Line 25)	26	
	27	Nevada Taxable Revenue (Line 11 less Line 26, but not less than $0)	27	
	28	Tax rate per NAICS code category	28	0 . 0 0 0 6 3
Tax liability	29	Commerce Tax due	29	
	30	Plus penalty	30	
	31	Plus interest	31	
	32	Plus liability established by Department	32	
	33	Less credit(s) approved by Department	33	
	34	Total amount due and payable (Line 29 through Line 33)	34	
	35	Amount remitted with the return	35	

☑ Under penalty of perjury, I certify that I have examined this return and to the best of my knowledge and belief it is true, correct and complete.

Business Entity authorized representative's signature:		Phone number:	[redacted]
Name and title:	Paris Balaouras Member	Date:	08/27/2018

For Department use only

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA MEDICAL MARIJUANA CULTIVATION REGISTRATION CERTIFICATE
DEPARTMENT OF TAXATION

Issued Date: 07/01/2018
Expiration Date: 06/30/2019

Certificate Number: 7961468329791117339
Establishment ID: C012
Taxpayer ID: 1034887734-001
Correspondence ID:1800011918240

THIS REGISTRATION CERTIFICATE:
IS VOID IF ALTERED.
IS NOT ISSUED IN LIEU OF ANY LOCALLY REQUIRED BUSINESS LICENSE, PERMIT OR REGISTRATION.
IS VALID UNLESS SUSPENDED OR REVOKED.

RED EARTH
[redacted]

AS DEFINED BY NRS CHAPTER 453A.

Current Registration Certificate Location
RED EARTH
[redacted]

Signature

MUST BE DISPLAYED IN PUBLIC VIEW AT ESTABLISHMENT LOCATION

(Detach Here)

Attached is your **NEVADA Marijuana Cultivation Establishment Registration Certificate.**
A single number, the TID (Taxpayer Identification Number), identifies a taxpayer for MOST tax types. Please use your TID and LOC (Location Number) in correspondence or telephone calls to the Department.

As stated on the application or renewal, this license is valid from the issue date through 06/30/2019.

The Department of Taxation has forms, publications and information available via the internet at **https://tax.nv.gov.**

Returns along with the appropriate tax are due the last day of the month following activity. A return must be filed whether or not a liability exists.

This Certificate authorizes the holder to operate in accordance with the provisions of NRS 453A and NAC 453A. By accepting this license, I certify that I understand that I am required to comply with all State of Nevada laws, including, but not limited to NRS 453A and NAC 453A, and that noncompliance may result in penalties, suspension or revocation of this registration certificate and criminal prosecution.

This Nevada Marijuana Cultivation Establishment Certificate has been issued pursuant to an application or renewal duly filed and payment of prescribed fees and bond if applicable. This License shall be considered valid unless canceled, suspended or revoked for good cause in accordance with NRS chapter 453A.

OFFICE LOCATION:

Nevada Department of Taxation
1550 College Pkwy
Suite 115
Carson City NV 89706
(775) 684-2000

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov

1550 College Parkway, Suite 115
Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

RENO OFFICE
4600 Kietzke Lane
Building L, Suite 235
Reno, Nevada 89502
Phone: (775) 687-9999
Fax: (775) 688-1303

BRIAN SANDOVAL
Governor
JAMES DEVOLLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

LAS VEGAS OFFICE
Grant Sawyer Office Building, Suite1300
555 E. Washington Avenue
Las Vegas, Nevada 89101
Phone: (702) 486-2300 Fax: (702) 486-2373

HENDERSON OFFICE
2550 Paseo Verde Parkway, Suite 180
Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

NEVADA STATE MARIJUANA ESTABLISHMENT LICENSE APPLICATION

This application is for acquiring a license to grow, produce, sell at retail or test marijuana within the State of Nevada for holders of a Medical Marijuana Establishment registration certificate with the Department of Taxation that do not currently hold a Recreational License.

All required documentation and a non-refundable application fee of $5,000, plus the amount for the license fee, must be submitted with this application.

Please complete a separate application for each license and location.

1	Marijuana Establishment Type: ☒ Cultivation ☐ Production ☐ Retail ☐ Lab	Department of Taxation Identification Number: 1034887734
2	Corporate/Entity Name: Red Earth LLC	Federal Tax Identification Number: 81-4155215
3	Nevada Name of Establishment (DBA):	Medical Marijuana Registration Certificate Number: C012
4	Physical Address of Marijuana Establishment: [redacted]	
5	Mailing Address [redacted]	Business Telephone [redacted]

6	Monday:	Tuesday:	Wednesday:	Thursday:	Friday:	Saturday:	Sunday:
Hours of Operation:	9-6	9-6	9-6	9-6	9-6	9-6	—

7	Contact Name: Paris Balaouras	Email Address: [redacted]	Telephone Number: [redacted]
8	Agent Card Designee Name: Paris Balaouras	Email Address: [redacted]	Telephone Number: [redacted]
9	Request and Consent to Release Application Form for Marijuana Establishment License Attached: ☒	10	Affiliated Marijuana Establishment Form(s) Attached: ☒
11	Owner, Officer, and Board Member Information Form(s) Attached: ☒		
12	Has the Medical Marijuana Establishment registration certificate been suspended after November 12, 2017? NO ☒ YES ☐	13	Is the marijuana establishment zoned by the local jurisdiction for retail marijuana? YES ☒ NO ☐ If yes, include written notice from the locality. If no, provide the anticipated approval date:

14 * Signatures must be those of a responsible party *

By signing this page, the owner, officer, or board member attests that they understand that the proposed marijuana establishment must be properly zoned in compliance with NRS 453D.210(5)(a)-(c) and NRS 453D.210(5)(e) prior to receiving a marijuana establishment license.

I declare under penalty of perjury that the information provided is true, correct and complete to the best of my knowledge and belief and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing.

*Signature Responsible Party / Original	Print Name And Title	Date
[signature]	PARIS BALAOURAS / CEO	6/19/18

Please submit this application along with all required documents and payments to any Department of Taxation office on or before June 26, 2018.

RECEIVED
JUN 25 2018
Department of Taxation

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Confidential

Acres Cultivation, LLC
Vendor QuickReport
June 1, 2015 through June 25, 2018

	Type	Date	Memo	Payment
Amargosa Valley				
	Check	04/01/2015	Gold Sponorship & Booth	500.00
	Bill Pmt -Check	11/22/2017	April 2017 thru Sept 2017 7LB	11,696.68
	Bill Pmt -Check	12/01/2017	Oct 2017 7LB Payment	700.12
	Bill Pmt -Check	12/08/2017	Nov 2017 7lb Payment	599.01
	Bill Pmt -Check	02/22/2018	Jan 2018 7lb Payment	144.79
	Bill Pmt -Check	03/06/2018	Feb 2018 7lb Payment	1,435.39
	Bill Pmt -Check	05/16/2018	March and April 2018 7Lb Payment	3,157.58
				18,233.57
Dept of Employment, Training & Rehabilita				
	Liability Check	03/25/2016	Unemployment & Career Enhancement - 1st Qtr 2016	612.89
	Liability Check	07/01/2016	Unemployment & Career Enhancement - 2nd Qtr 2016	1,795.42
	Liability Check	09/23/2016	Unemployment & Career Enhancement - 3rd Qtr 2016	1,693.41
	Liability Check	12/30/2016	Unemployment & Career Enhancement - 4th Qtr 2016	1,219.84
	Liability Check	02/24/2017	Unemployment & Career Enhancement - 1st Qtr 2017	2,089.03
	Liability Check	07/01/2017	Unemployment & Career Enhancement - 2nd Qtr 2017	3,400.20
	Liability Check	09/27/2017	Unemployment & Career Enhancement - 3rd Qtr 2017	4,543.14
	Liability Check	12/29/2017	Unemployment & Career Enhancement - 4th Qtr 2017	6,728.66
	Liability Check	06/14/2018	Unemployment & Career Enhancement 1st Qtr 2018	10,006.42
				31,484.04
Dept of Public and Behavioral Health				
	Bill Pmt -Check	06/21/2016	Initial Operating Fee's - C013, P012	6,000.00
	Bill Pmt -Check	10/13/2016	MME Pre - Opening Inspection and Review Invoices 566, 568, 569	1,370.00
	Bill Pmt -Check	09/12/2017	MME Prorated Registration Renewal Fee SFY18 Invoices 8005 & 8104	1,616.44
	Bill Pmt -Check	12/22/2017	MME Routine Inspection Invoices 741, 737, 913, 1093, 1577, 1578	5,661.00
	Bill Pmt -Check	12/22/2017	MME Routine Inspection Invoices 1098, 1027 WMT Penalty and Interest	4,307.99
				18,955.43
Nevada Dept of Taxation				
	Check	05/31/2017	MME - Production License	15,000.00
	Check	05/31/2017	MME - Cultivation License	35,000.00
	Check	07/14/2017	AC- Wholesale Marijuana Tax June 2017	5,773.65
	Bill Pmt -Check	10/30/2017	AC-Wholesale Marijuana Tax Sept 2017	4,668.08
	Check	11/29/2017		5,000.00
	Check	11/29/2017		5,000.00
	Bill Pmt -Check	12/11/2017	AC - Wholesale Marijuana Tax Oct. 2017	20,098.54
	Bill Pmt -Check	01/05/2018	AC - Wholesale Marijuana Tax Nov. 2017	16,491.47
	Bill Pmt -Check	02/28/2018	AC - Modified Business Tax 2nd, 3rd, 4th 2016 1st, 2nd, 3rd, 4th 2017	8,461.05
	Bill Pmt -Check	02/28/2018	AC - Wholesale Marijuana Tax Jan. 2018	5,599.75
	Bill Pmt -Check	04/20/2018	AC - Wholesale Marijuana Tax Feb. 2018	45,270.74
	Bill Pmt -Check	06/01/2018	AC - Wholesale Marijuana Tax Mar. 2018	55,038.82
	Bill Pmt -Check	06/05/2018	AC - Modified Business Tax 1st Qtr 2018	3,953.08
	Bill Pmt -Check	06/05/2018	AC - Wholesale Marijuana Tax April 2018	27,740.48
				253,095.66
Nye County Assessor				
	Bill Pmt -Check	02/06/2018	Personal Property Tax (Equipment) - Parcel #019-751-03	5,300.00
	Bill Pmt -Check	02/13/2018	Personal Property Tax (Equipment) - Parcel #019-751-03	269.26
				5,569.26
Nye County				
	Bill Pmt -Check	05/03/2017	Special Use Permit Application	1,500.00
	Check	08/02/2017	Lincensing Cultivation and Predcution $2,500 each	5,000.00
	Check	08/02/2017	June 2017 Marijuana Sales	3,069.15
	Check	11/08/2017	June 2017 Marijuana Sales Addition & Sept Marijuana Sales	3,329.58
	Check	11/08/2017	5563	10,000.00
	Bill Pmt -Check	12/11/2017	Oct 2017 Marijuana Sales	2,567.20
	Bill Pmt -Check	12/15/2017	Sept 2017 Marijuana Sales	625.08
	Bill Pmt -Check	12/15/2017	Nov 2017 Marijuana Sales	2,140.01
	Check	03/05/2018	Special Use Permit Application	750.00
	Check	03/05/2018	Waiver	525.00
	Bill Pmt -Check	03/16/2018	Jan and Feb 2018 Marijuana Sales	6,340.98
	Bill Pmt -Check	05/20/2018	BOA-1938	1,500.00
	Bill Pmt -Check	05/21/2018	March and April 2018 Marijuana Sales	9,494.80
	Bill Pmt -Check	05/30/2018	Med MJ Pro Renewal - Cultivation	2,500.00
	Bill Pmt -Check	05/30/2018	Med MJ Pro Renewal - Production	2,500.00
	Bill Pmt -Check	06/11/2018	Permits	7,345.00
				59,186.80
			Total Paid	386,524.76

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Acres Medical, LLC
Vendor QuickReport
All Transactions

	Type	Date	Memo	Credit
City of Las Vegas				
	Check	07/21/2014		6,280.00
	Check	07/21/2014		6,280.00
	Check	07/21/2014		6,280.00
	Bill Pmt -Check	12/14/2015	Permit	344.00
	Bill Pmt -Check	12/14/2015	Permit	550.00
	Bill Pmt -Check	12/01/2015	Change of Contractor Permit	1,772.00
	Check	05/01/2017	Licensing Fees-Dispensary	12,500.00
	Check	06/01/2017	Licensing Fees-Production	833.33
	Check	05/17/2017	Licensing Application Dispensary, Production, Cultivation	62,500.00
	Check	05/17/2017		4,166.67
	Check	05/17/2017		1,080.00
	Check	05/17/2017		1,080.00
	Bill Pmt -Check	07/14/2017	Medical Marijuana Business License Renewal	2,696.83
	Bill Pmt -Check	07/14/2017	Medical Marijuana Business License Renewal	5,000.00
	Check	02/26/2018	Retail and Medical Business License Renewal - Dispensary	47,050.42
	Check	04/12/2018	Retail Marijuana Business License Renewal - Production	1,109.00
				170,112.25
City of Las Vegas Compliance Permits				
	Bill Pmt -Check	11/02/2015	Permits -Cultivation	5,000.00
	Bill Pmt -Check	11/02/2015	Permits -Production	5,000.00
	Check	11/29/2016	Cultivation Compliance Permit	5,000.00
	Check	11/29/2016	Production Compliance Permit	5,000.00
	Check	11/29/2016	Dispensary Compliance Permit	5,000.00
				25,000.00
Dept of Employment, Training & Rehabilita				
	Liability Check	09/23/2016	Unemployment & Career Enhancement - 3rd Qtr 2016	646.15
	Liability Check	12/30/2016	Unemployment & Career Enhancement - 4th Qtr 2016	372.42
	Liability Check	02/24/2017	Unemployment & Career Enhancement - 1st Qtr 2017	1,349.28
	Liability Check	07/31/2017	Unemployment & Career Enhancement - 2nd Qtr 2017	7,670.81
	Liability Check	09/27/2017	Unemployment & Career Enhancement - 3rd Qtr 2017	7,057.58
	Liability Check	12/29/2017	Unemployment & Career Enhancement - 4th Qtr 2017	5,155.50
	Liability Check	06/14/2018	Unemployment & Career Enhancement - 1st Qtr 2018	9,498.16
				31,191.40
Dept. of Public and Behavioral Health				
	Bill Pmt -Check	07/06/2017	Pre-Opening Inspection Disp. & Prod. Invoice 1178, 1179, & 1058	2,858.25
	Bill Pmt -Check	01/10/2018	MME Routine Inspection Invoice 1127	2,775.00
				5,633.25
Nevada Dept of Taxation				
	Check	05/30/2017	EIN 46-5483119	12.00
	Check	05/30/2017	EIN 46-5485082	12.00
	Check	07/14/2017	Retail Marijuana Tax - June 2017	2,294.11
	Check	07/31/2017	Sales & Use Tax - June 2017	6,936.41
	Check	08/29/2017		460.00
	Bill Pmt -Check	09/01/2017	Retail Marijuanan Tax - July 2017	24,604.00
	Bill Pmt -Check	09/01/2017	Sales & Use Tax - July 2017	24,303.72
	Check	10/16/2017		1,506.00
	Bill Pmt -Check	10/31/2017	Retail Marijuana Tax - July, Aug, Sept Sales & Use July, Aug, & Sept 2017	109,181.95
	Bill Pmt -Check	11/20/2017	Sales & Use Tax - Sept 2017	4,667.23
	Bill Pmt -Check	12/11/2017	Retail Marijuana Tax - Oct 2017	22,994.47
	Bill Pmt -Check	12/11/2017	Sales & Use Tax - Oct 2017	22,000.59
	Bill Pmt -Check	01/05/2018	Retail Marijuana Tax - Nov 2017	22,542.30
	Bill Pmt -Check	01/05/2018	Sales & Use Tax Nov 2017	22,239.94
	Bill Pmt -Check	01/10/2018	MME Routine Inspection Invoice 1304 & 1058	1,279.25
	Bill Pmt -Check	01/17/2018	MME Change of Location Invoice 1832	1,300.00
	Bill Pmt -Check	02/28/2018	Sales & Use Tax Dec 2017	19,666.78
	Bill Pmt -Check	02/28/2018	Retail Marijuana Tax - Dec 2017	21,962.14
	Bill Pmt -Check	02/28/2018	Modified Business Tax - 2nd, 3rd, 4th Qtr 2017	7,236.09
	Bill Pmt -Check	03/29/2018	Retail Marijuana Tax - Jan 2018	23,326.00
	Bill Pmt -Check	03/29/2018	Sales & Use Tax - Jan 2018	22,947.78
	Bill Pmt -Check	04/26/2018	Retail Marijuana Tax -Feb 2018 Sales & Use - Feb 2018	26,329.78
	Check	05/08/2018	Agent Cards	150.00
	Check	05/14/2018	Agent Cards	156.25
	Check	05/14/2018	Agent Cards	64.25
	Check	05/14/2018	Agent Cards	375.00
	Check	05/14/2018	Agent Cards	150.00
	Check	05/14/2018	Agent Cards	300.00
	Check	05/15/2018	Business License	880.00
	Check	05/15/2018	Agent Cards	150.00
	Check	05/15/2018	Agent Cards	64.25
	Bill Pmt -Check	05/16/2018	Non-Compliant Advertising	1,250.00
	Check	05/17/2018	Agent Cards	75.00
	Check	05/30/2018	For Renew	75.00
	Bill Pmt -Check	05/29/2018	Retail Marijuana Tax - March 2018	41,023.76
	Bill Pmt -Check	05/29/2018	Sales & Use Tax March 2018	38,593.42
	Check	05/09/2018	Agent Cards	100.00
	Check	05/29/2018	Agent Cards	50.00
	Check	05/25/2018	Agent Cards	64.25
	Check	05/30/2018	Agent Cards	150.00
	Bill Pmt -Check	06/05/2018	Modified Business Tax - 1st Qtr 2018	3,001.99
	Bill Pmt -Check	06/05/2018	Retail Marijuana Tax - April 2018	47,008.76
	Check	06/06/2018	Agent Cards	450.00
	Bill Pmt -Check	06/07/2018	Sales & Use Tax April 2018	41,583.17
	Check	06/11/2018	Agent Cards	75.00
				568,766.79
			Total Paid	820,903.69

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

5.2.10. ***Tab X*** *– Organizational structure and owner, officer or board member information*

The description of the proposed organizational structure of the proposed recreational marijuana establishment and information concerning each owner, officer and board member of the proposed recreational marijuana establishment must be included in this tab and demonstrate the following criteria:

5.2.10.1. *An organizational chart showing all owners, officers and board members of the recreational marijuana establishment including percentage of ownership for each individual.*

5.2.10.2. *An Owner, Officer and Board Member Attestation Form must be completed for each individual named in this application (Attachment B).*

5.2.10.3. *The supplemental Owner, Officer and Board Member Information Form should be completed for each individual named in this application. This attachment must also include the diversity information required by R092-17, Sec. 80.1(b) (Attachment C).*

5.2.10.4. *A resume, including educational level and achievements for each owner, officer and board member must be completed for each individual named in this application.*

5.2.10.5. *A narrative description not to exceed 750 words demonstrating the following:*

5.2.10.5.1. *Past experience working with government agencies and highlighting past community involvement.*

5.2.10.5.2. *Any previous experience at operating other businesses or non-profit organizations, including marijuana industry experience.*

5.2.10.6. *A Request and Consent to Release Application Form for Recreational Marijuana Establishment License(s) for each owner, officer and board member should be completed for each individual named in this application (Attachment D).*

5.2.10.7. *A copy of each individual's completed fingerprint submission form demonstrating he or she has submitted fingerprints to the Nevada Department of Public Safety.*

5.2.10.1. *An organizational chart showing all owners, officers and board members of the recreational marijuana establishment including percentage of ownership for each individual.*

RED EARTH LLC

Paris Balaouras, CEO
100% Ownership

David Radcliffe
Board Member

Experienced providing security and personal protection, as well as marketing and cultivating business.

In charge of security and marketing for all dispensaries owned by Red Earth LLC

Andy Zhang
Board Member

Experienced as Managing Partner of a cultivation facility called PowerPlant Organics LLC in Pueblo, CO.

In charge of finances and construction of dispensaries owned by Red Earth LLC.

Jay Matos
Board Member

Previous experience as General Manager for Panacea & Medmen dispensary, production and cultivation facility.

General Manager and Compliance Officer of all dispensaries owned by Red Earth LLC

Sabrina Mahmud
Board Member

Previous Manager and Lead Budtender for two Dispensaries (Panacea and medmen).

Managing all dispensaries owned by Red Earth LLC.

Cathy Bout
Board Me

Experienced pharmacist.

In charge of quality contr inventory fo dispensaries owned by Re Earth LLC.

5.2.10.2. *An Owner, Officer and Board Member Attestation Form must be completed for each individual named in this application (Attachment B).*

STATE OF NEVADA
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Governor
JAMES DEVOLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

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Fax: (702) 486-3377

ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Paris Balaouras (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 8/30/18

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 8/30/18 (date)

By Paris Balaouras (name(s) of person(s) making statement)

Notary Stamp: CRYSTAL AMORELLI
Notary Public, State of Nevada
Appointment No. 17-1219-1
My Appt. Expires Sep 19, 2020

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, John J. Matos (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 09/04/2018

State of Nevada
County of Clark
Signed and sworn to (or affirmed) before me on September 4TH, 2018 (date)
By John J. Matos (name(s) of person(s) making statement)

FELIPE I. RODRIGUEZ
Notary Public State of Nevada
No. 07-1486-1
My Appt. Exp. February 18, 2019

Notary Stamp 2/18/2019

Felipe I. Rodriguez
Signature of notarial officer

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Andy Zhang (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 8/28/18

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 08/28/2018 (date)

By Andy Zhang (name(s) of person(s) making statement)

Notary Stamp: WENDY SCHEH
Notary Public - State of Nevada
County of Clark
APPT. NO. 11-5218-1
My App. Expires June 24, 2019

Signature of notarial officer: Wendy Scheh

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, David R. Radcliffe (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

David Radcliffe 9/13/2018

Signature of Owner, Officer or Board Member Date Signed

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on Sept. 13, 2018 (date)

By David Randall Radcliffe (name(s) of person(s) making statement)

XIANG AO
Notary Public - State of Nevada
County of Clark
APPT. NO. 16-2659-1
My App. Expires May 20, 2020

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Sabrina Mahmud (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/11/18

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 9/11/2018 (date)

By Sabrina Mahmud (name(s) of person(s) making statement)

Notary Stamp: CRYSTAL AMORELLI
Notary Public, State of Nevada
Appointment No. 17-1219-1
My Appt. Expires Sep 19, 2020

Signature of notarial officer

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ATTACHMENT B

OWNER, OFFICER AND BOARD MEMBER ATTESTATION FORM

I, Catherine Boutsikakis (PRINT NAME)

Attest that:

I have not been convicted of an excluded felony offense as defined in NRS 453D; and

I agree that the Department may investigate my background information by any means feasible to the Department; and

I will not divert marijuana to any individual or person who is not allowed to possess marijuana pursuant to R092-17, Sec. 94 and 453D of the NRS; and

All information provided is true and correct.

Signature of Owner, Officer or Board Member — Date Signed: 9/15/18

State of Nevada

County of CLARK

Signed and sworn to (or affirmed) before me on SEPTEMBER 15, 2018 (date)

By CATHERINE BOUTSIKAKIS (name(s) of person(s) making statement)

Notary Stamp: KELLY GEHRING
Notary Public - State of Nevada
County of Clark
APPT. NO. 07-4292-1
My App. Expires Aug 7, 2019

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

5.2.10.3. *The supplemental Owner, Officer and Board Member Information Form should be completed for each individual named in this application. This attachment must also include the diversity information required by R092-17, Sec. 80.1(b) (Attachment C).*

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☒ OR ☐ OF ☐ BM
Balaouras	Paris		

Date of Birth: [redacted] Race: Caucasian Ethnicity: Non-Hispanic
Gender: Male

Residence Address: [redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Paris's role and title in this organization is dispensary owner. Responsibilities of the owner include but are not limited to; providing the organization with starter capital, property locations, advertisement plans, background checks, staying informed about the market, supply business plans, budget rent, renew licenses, applications, hiring employees and security, budgeting product purchasing, and staying informed to ensure correct compliance with current laws and regulations for Recreational Marijuana Retail Establishment in NV.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ☒ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☒ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ☐ BM
Matos	John	J	

Date of Birth: [redacted] Race: White Ethnicity: Hispanic
Gender: Male

Residence Address: [redacted]

City: [redacted] County: [redacted] State: [redacted] Zip: [redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:

General Manager - See description attached

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ■ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ■ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ■ No

Is this individual employed by or a contractor of the Department? ☐ Yes ■ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ■ No

Is this individual a law enforcement officer? ☐ Yes ■ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ■ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ■ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

General Manager Role and Responsibilities:

Responsible for the achievement of organization's mission, to maintain compliance in regard to dispensing medicinal/recreational cannabis and other various cannabis products;

1. Shall educate the staff and oversee day to day operations.
2. Assesses the overall condition of the Dispensary.
    1. Assures that Security is maintained in and around the dispensary
    2. Assures the quality of service and patient/client care
3. Responsible for Access Control, Inventory Control & Record keeping Activities.
    1. Organizing and coordinating daily and weekly duties of staff members within the Dispensary Establishment.
    2. Monitoring Data input into Metrc during product receiving, packaging and dispensing processes
    3. Carry out plans and procedures to keep dispensary Compliant.
        1. Assure that compliance is properly implemented by the Compliance Officer
        2. Assures that all staff are educated on proper compliance procedures
        3. Directly communicate with the State on any potential Compliance issues
    4. Responsible for recruitment, employment and release of personnel directly involved with Dispensary Facility
        1. Create a professional culture and environment for all Dispensary Agents
        2. Create an environment that attracts, keeps, and motivates a highly qualified staff.
        3. Develops training programs, policies, and procedures
        4. Provides Leadership for all Dispensary agents.

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ☒ BM
Zhang	Andy		

Date of Birth: [redacted] Race: Asian Ethnicity: Non-Hispanic
Gender: Male

Residence Address:
[redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Andy is a board member who is in charge of finance and construction. His roles and responsibilities include but are not limited to; overseeing documentation of agendas, organizational planning, networking, monitoring and managing finances, reviewing opportunities and risks, getting bid for subcontractors, and making sure the company is following states compliance, rules and regulations.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ☒ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ☒ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ■ BM
Radcliffe	David	R.	

Date of Birth: [redacted] Race: White Ethnicity: Non-Hispanic
Gender: Male

Residence Address: [redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
David's title and role in the organization is security manager and marketing officer. Responsibilities include developing and implementing security policies, protocols and procedures. Recruiting, training and supervising officers and guards. Controlling security budgets and monitoring expenses. His duties also include developing marketing strategies for the company objectives, budgeting advertisements, overseeing websites and social media platforms, brand management, and monitoring effectiveness of marketing communications.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ■ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ■ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ■ No

Is this individual employed by or a contractor of the Department? ☐ Yes ■ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ■ No

Is this individual a law enforcement officer? ☐ Yes ■ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ■ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ■ Yes ☐ No

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ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ☒ BM
Mahmud	Sabrina Renee	C.	

Date of Birth: [redacted]
Gender: Female
Race: Native American
Ethnicity: Non- Hispanic

Residence Address:
[redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Sabrina's title and role in the organization is dispensary manager. As a dispensary manager, the responsibilities include but are not limited to overseeing day to day operations, educating and training staff, ensure everything in the facility is compliant and follows up to date regulations, scheduling staff and events, monitoring data and products in Metrc, oversee security guards, reporting sales to the state, building sanitation, create expense reports and weekly sales reports to bring back to upper management and coordinating with owners/board members on marketing, recruiting, procuring and daily operations.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ☒ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ☒ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ☒ No

Is this individual employed by or a contractor of the Department? ☐ Yes ☒ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ☒ No

Is this individual a law enforcement officer? ☐ Yes ☒ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ☒ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application?
☒ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

[redacted]

[redacted]

This card is the property of the Sault Ste Marie
Tribe of Chippewa Indians

If found, please return to the Sault Tribe Enrollment
Department - P.O. Box 1628, Sault Ste Marie, MI 49783
1-906-635-3396 or 1-800-251-6597

Aaron A Payment
Tribal Chairman

Julie M Salo
Tribal Registrar

[redacted]

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov
1550 College Parkway, Suite 115
Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

RENO OFFICE
4600 Kietzke Lane
Building L, Suite 235
Reno, Nevada 89502
Phone: (775) 687-9999
Fax: (775) 688-1303

BRIAN SANDOVAL
Governor
JAMES DEVOLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

LAS VEGAS OFFICE
Grant Sawyer Office Building, Suite1300
555 E. Washington Avenue
Las Vegas, Nevada 89101
Phone: (702) 486-2300 Fax: (702) 486-2373

HENDERSON OFFICE
2550 Paseo Verde Parkway, Suite 180
Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

ATTACHMENT C
OWNER, OFFICER AND BOARD MEMBER INFORMATION FORM

Provide the following information for each owner, officer and board member listed on the Recreational Marijuana Establishment Application. Use as many sheets as needed.

Last Name:	First Name:	MI:	☐ OR ☐ OF ■ BM
Boutsikakis	Catherine		

Date of Birth: [redacted] Race: White Ethnicity: Non-Hispanic
Gender: Female

Residence Address:
[redacted]

City:	County:	State:	Zip:
[redacted]	[redacted]	[redacted]	[redacted]

Describe the individual's title, role in the organization and the responsibilities of the position of the individual:
Catherine is a board member who will be in charge of Quality Control and Inventory management. Using her pharmacy background, she will organize, inspect and monitor for defects and notify if replenishment is needed for product inventory. She will control damaged goods and handle proper disposal. She will intake shipments and follow strict transportation and delivery protocols. She will ensure processing/intake room and vault are all up to NV compliance. She will staff processing room and relay any messages needed between GM, owners, other board members, and those alike.

Has this individual served as a principal officer or board member for a marijuana establishment that has had their establishment license or certificate revoked? ☐ Yes ■ No

Has this individual previously had a medical marijuana establishment agent registration card or marijuana establishment agent registration card revoked ☐ Yes ■ No

Is this individual an attending provider of health care currently providing written documentation for the issuance of registry identification cards or letters of approval? ☐ Yes ■ No

Is this individual employed by or a contractor of the Department? ☐ Yes ■ No

Has a copy of this individual's signed and dated Recreational Retail Marijuana Store Principal Officer or Board Member Attestation Form been submitted with this application? ☐ Yes ■ No

Is this individual a law enforcement officer? ☐ Yes ■ No

Has a copy of this individual's fingerprints on a fingerprint card been submitted to the Nevada Department of Public Safety? ■ Yes ☐ No

Has a copy of the Request and Consent to Release Application Form been submitted with this application? ■ Yes ☐ No

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

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DEPARTMENT OF TAXATION
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Carson City, Nevada 89706-7937
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HENDERSON OFFICE
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Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

ATTACHMENT C (continued)

Has an ownership or financial investment interest in any other MME or ME. ☒ Yes ☐ No
If yes, list the person, the other ME(s) and describe the interest.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	INTEREST DESCRIPTION
Paris Balaouras	Red Earth, LLC - Medical	CO12	Owner / Manager, 100%
Paris Balaouras	Acres Medical, LLC	DO11	Minority interest owner, 9.8%
Paris Balaouras	Acres Medical, LLC	PO11	Minority interest owner, 9.8%
Paris Balaouras	Acres Cultivation, LLC	CO13	Minority interest owner, 11%
Paris Balaouras	Acres Cultivation, LLC	PO12	Minority interest owner, 9%
Paris Balaouras	Red Earth, LLC - Recreational	CO12	Owner / Manager, 100%

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

STATE OF NEVADA
DEPARTMENT OF TAXATION
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Henderson, Nevada 89074
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Fax: (702) 486-3377

ATTACHMENT C (continued)

For each owner (OR), officer (OF) and board member (BM) that is currently serving as an owner, officer or board member for another medical marijuana establishment or marijuana establishment, please fill out the information below.

NAME	OTHER MARIJUANA ESTABLISHMENT	MME / ME ID#	Capacity (OR, OF, BM)
Paris Balaouras	Red Earth, LLC	CO12	OR
Paris Balaouras	Acres Medical, LLC	DO11	BM
Paris Balaouras	Acres Medical, LLC	PO11	BM
Paris Balaouras	Acres Cultivation, LLC	CO13	BM
Paris Balaouras	Acres Cultivation, LLC	PO12	BM

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

5.2.10.4. *A resume, including educational level and achievements for each owner, officer and board member must be completed for each individual named in this application.*

Paris Balaouras

> Business Developer

> Visionary

EXPERIENCE

October 2016 - PRESENT

Red Earth LLC

CEO

Proposed marijuana dispensaries in the Las Vegas Valley. Using 25+ years business experience, his education in and passion for the benefits of medical marijuana, created and oversees the company.

June 2016 – August 2017

Natural Remedy Patience Center

Principal Officer

In charge of management of the dispensary, production and cultivation facilities. Hired all key personnel and participated in executive management and administrative decisions including marketing, whole-selling, extracting and sourcing.

2007 – Present

Formostar LLC

Managing Member & Partner

Manufactures and distributes medical equipment specializing in pain management, detoxification, and weight loss using far infra-red technology. Evolved the technology making the equipment produce far greater results with each iteration and developed the company into the world leader in this technology, with over 25,000 Formostar Encore machines in use today. Worked with FDA, ETL, and CE regulatory agencies for certifications and compliance.

2008 – PRESENT

Universal Products LLC

Managing Member & Partner

Formed a full-service distribution center, marketing products to salons, spas, nail technicians, estheticians, certified nurses, medical offices, tanning salons, chiropractors, massage therapists and exclusive retreats. Developed a team of technicians and sales staff to support over three thousand clients both domestically and internationally. Negotiated relationships with manufacturers.

EDUCATION

2014

Oaksterdam University

Basic Indoor Horticulture – Certificate of Achievement

Comprehensive Indoor Horticulture – Certificate of Achievement

2014

GreenCultureED

Master Certification – Horticulture, Cooking with Marijuana, Bud Tender Training, Marijuana Laws, How to Open a Dispensary & Delivery Service and Marijuana as a Medicine

1989 – 1992

North Carolina State University, Raleigh, NC

Majored in Business Administration

Sigma Chi Fraternity, NC State Chapter Pledge Trainer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Jay Matos

> General Manager
> Government Affairs
> President

EXPERIENCE

February 2018 – April 2018

Medmen Dispensary

General Manager (Contractor)

Managed and executed the sale, conversion and transfer of Panacea systems and personnel to Medmen while staying open for business, keeping up with compliance and managing inventory in government database METRC.

August 2017 - 2018

Panacea / Just Quality Dispensary Grow & Production

General Manager (Contractor)

Responsible for bringing the dispensary into compliance with State regulations. Set policies and procedures for employees. Set budget, ordered products, managed quality control, store complaints. Facilitated sale of dispensary to Medmen.

2009 – Present

LeadNet, LLC

Government Affairs

Key Accomplishments:

- An intricate part of a team assisting and lobbying for the Medical Marijuana law in Nevada. Worked with most government agencies in NV, including municipalities, in developing and/or implementing policies. Well versed in MME laws; policies; processes and procedures of the industry; how an MME business operates, and how it affects the public.
- Planned and hosted a trip to Arizona for a contingent of Nevada lawmakers to educate them on local and state MME laws, policies and procedures and how MME facilities operate.
- Assisted the Clark County Commission with a town hall meeting to educate the public on how MME facilities operate under government law, policies and procedures; and hosted a workshop for Clark County staff, Metro Police and Fire Departments, the Health Department, NV Energy and SN Water District.
- Consistently attended Clark County open meetings on policy development.
- Negotiate retainer agreements with businesses to represent them as a liaison and work with NV Legislators, City Council, County Commissioners and staff to expedite client businesses' special use permits, licenses, zoning, ordinances and BDR's.
- Work with government officials on creating ordinances, regulations and policies and procedures. Host town hall meetings educating the public on new businesses entering their district/wards.

February 2003 – January 2009

NetFaze Technologies

President

Key Accomplishments:

- Managed operating budgets and Service Level Agreements in the hospitality, finance, transportation and retail industries.
- Managed United States Department of Energy, Bechtel Nevada operations, desktop deployment and telecom contracts with 96% customer service satisfaction.

SKILLS

Fluent in Spanish

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Andy Zhang

> Managing Partner / CFO
> Accounting Professional

SUMMARY

Accounting, audit, financial analysis and reporting professional with an emphasis on the cannabis industry.

EXPERIENCE

May 2017 - PRESENT

Power Plant Organics LLC

Managing Partner / CFO

> Manage finances of cultivation facility.
> Review all information from METRC database system and provide year-end reports to the state.
> Monitor and report sales to the State Marijuana Division.
> Set quarterly goals and project company sales.

November 2013 – May 2017

Tropical Smoothie Cafe

Shift Leader

> Led a team of three people to ensure all day-to-day operations ran smoothly.
> Ensured every customer received an exceptional experience.
> Performed audits to ensure that total cash received matched reported revenue.
> Received consistent promotions and increased responsibility, including partnering with management on maintaining inventory and purchase orders.

January 2016 – May 2016

ATBS

Reconcilor / Client Accountant

> Completed Schedule C (Form 1040) to report the profit and loss for independent contractors and sole proprietors.
> Performed income audits to verify income statements for client companies.
> Interfaced with tax accounting team and client companies to clarify information.
> Ensured that documentation provided by clients was in compliance with IRS regulations.

EDUCATION

May 2017

University of Denver Business School

Bachelor of Science in Accounting

SKILLS

> Salesforce
> METRC Database System
> MSOffice
> Fluent in Mandarin

COMMUNITY SERVICE ACTIVITIES

Junior Achievement – Rocky Mountains, Denver, CO

Taught a local 3rd grade class on entrepreneurship and helped to motivate clients.

Denver Children's Home, Denver, CO

Organized fun, interactive events for the children staying in the home. Assisted staff with required paperwork.

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

David Radcliffe

> Consultant
> Director of Special Operations
> Mineman / Corpsman

[redacted]

EXPERIENCE

July 2018 - Present
Red Earth, LLC
Contractor

- Provide oversight and direction for the development of security procedures and staff.
- Construction management

January 2011 – March 2015
KORR Defense Group
Director of Special Operations

- Supervised a team of 5, providing round-the-clock security for high net worth individuals.

September 2006 – October 2014
US Navy
Mineman cross rate to Corpsman, USMC

- Train, direct and supervise personnel in ship's maintenance, testing, handling and stowing weapons and ammunition
- Perform organizational maintenance on weaponry and equipment.
- As a Corpsman in the USMC, functioned as medical personnel and health care provider.

February 2004 – September 2006
AutoDesk
Western Hemisphere Manager
As a result of multiple projects developing software for Buzzsaw, the Department of Defense and Solidworks, became the Western Hemisphere Project Manager with AutoDesk. Buzzsaw is a cloud-based software enabling project teams to better centralize and more securely exchange and synchronize project information, enhance team collaboration, and support building information modeling (BIM) workflows.

EDUCATION & TRAINING

1991
Columbia College
Bachelor of Business Administration, Military History

SKILLS & EXPERTISE

- Strategic Planning
- Project Bidding
- Combat Lifesaver
- Counter Intelligence
- Software Quality
- Budgeting
- Management Consulting
- Marksmanship
- MS Office
- Assurance Pro Engineer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Sabrina Mahmud

> Dispensary Manager
> Office Manager

OBJECTIVE

Further my knowledge and experience in the cannabis industry to contribute to the mission of the organization I am involved with and to eventually run my own dispensary.

EXPERIENCE

June-Present

Icon Management

Office Manager

> Proficient in Microsoft Office, Google, and Adobe
> Schedule meetings and handle company's calendar
> Ensure everyone has a focus and stays on task

February 2018-August 2018

Medmen

Store Manager

> Oversaw day to day operations
> Ensured compliance with the state of Nevada Regulations
> Input product into METRIC and Point of Sales software

May 2017-Febuary 2018

Panacea Quality Cannabis

Lead Budtender

> Educated staff and guests on product knowledge
> Cash Handling
> Processed inventory
> Customer service

May 2017-Febuary 2018

911 Keys & Sound

Office Manager

> Handled endorsements and ordered parts for keyboards
> Replied to prospective customers and managed scheduling
> Proficient in Quickbooks
> Oversaw technicians and the quality of their work

EDUCATION

2012-Present

College of Southern Nevada

Associates in Science

> Preparation and prerequisites for PharmD
> Transferred from Central Michigan University

2010-2012

Central Michigan University

Microbiology with a minor in Chemistry

> Heavy science focus

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

Catherine Boutsikakis

> Consultant
> Staff Pharmacist
> Supervising Pharmacist

SUMMARY

Licensed pharmacist in Nevada and New York State with 25 years of experience providing top-notch pharmacy services in a retail setting. Outstanding interpersonal skills with a track record of establishing positive relationships. Respected leader, able to train and manage diverse teams to deliver peak performance.

EXPERIENCE

July 2015 - PRESENT
AB Consulting Group
Consultant

> Provide pharmaceutical consulting services i.e., expert advice on pharmacy services and medications.
> Provide social media consulting regarding medical cannabis.

August 2007 – August 2014
Pollina Pharmacy
Staff Pharmacist
Performed daily management of pharmacy, supervising all aspects of operations in absence of owner.

> Recognized for ability to manage a high volume of prescriptions.
> Cultivated strong network of physicians, resulting in an increase of new patients and revenue.
> Redesigned workflow for pharmacy operations to increase safety and productivity.
> Improved drug inventory management system to reduce waste and minimize back orders.

September 1993 – February 2006
Genovese Drug Stores / Eckerd Pharmacy
Supervising Pharmacist

> Managed ancillary staff and prepared shift schedules.
> Responsible for monitoring and maintaining inventory.
> Supervised and trained personnel and new pharmacists.
> Established and maintained professional working relationships with local health care providers.
> Managed one of the chain's "Fertility Sites", including dispensing of specialty drug products and compounding capsules and suppositories.
> Set up new pharmacies within the chain to meet federal, state and company specifications; then remain with the store for a select period to establish a relationship with the community

EDUCATION

May 1993
St John's University
Bachelor of Science in Pharmacy

SKILLS

> PDX and Optus Pharmacy systems > MS Office > Fluent in Greek

AWARDS

Received Eckerd Pharmacy Outstanding Pharmacy Management Award

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY

5.2.10.5. *A narrative description not to exceed 750 words demonstrating the following:*

5.2.10.5.1. *Past experience working with government agencies and highlighting past community involvement.*

5.2.10.5.2. *Any previous experience at operating other businesses or non-profit organizations, including marijuana industry experience.*

Paris Balaouras

Paris Balaouras has over 20 years of experience in the Cannabis Industry. Mr. Balaouras is a pioneer and entrepreneur credited with raising over 100 million dollars in the growing Cannabis space to date. Spotting the opportunity early, he entered the Nevada market as an exponent who delivered legislative change in Nevada by working closely with elected officials.

Paris worked with the State in implementing mindful regulations. In turn, he was awarded 1 of only 12 dispensary licenses in the City of Las Vegas, founding Acres Medical and Acres Cultivation. The dispensary currently holds five Nevada Medical Marijuana Establishment Certificates, located in Las Vegas and Nye County.

Mr. Balaouras' unique, operationally-savvy management and marketing styles catapulted the company's profile and profits. He expanded these enterprises into Nevada's largest commercial cultivation and production facilities. As smart vanguards do, Mr. Balaouras took his incisive experience on the road facilitating the development and expansion of multiple marijuana businesses in several states, including California, Colorado and Arizona.

In addition to attending NC State University and being a veteran of the US Army Reserves, Paris is a graduate of Oaksterdam University and has worked closely with the top cannabis school in the world. He has been influential in creating cutting-edge techniques in managerial processes, which are the essentials to any cannabis operation.

Andy Zhang

Andy Zhang is a board member with Red Earth. In addition to working with the other board members to ensure managers and staff are implementing the company's mission, Andy is specifically responsible for Finance and Accounting, ensuring company and regulatory policies are being adhered to.

After graduating from General William J. Palmer High School, Colorado Springs, Colorado in May 2017, Andy was accepted to the University of Colorado Denver - Business School for accounting. During college, Andy had the opportunity to participate in many community service activities with non-profit organizations Junior Achievement Rocky Mountains and Denver Children's Home helping to educate and rehabilitate disadvantaged or abused children.

While in Colorado, Andy worked with his father, Jun Dian Zhang, owner of a recreational cultivation license there, and his attorney to set up the operations and security plans for the cultivation facility. In addition, he helped gather all information needed for the state to issue the cultivation license. Andy coordinated with local marijuana enforcement division personnel providing required information with regard to taxes, business plans and operating plans and other paperwork.

Jay Matos

John "Jay" Matos is one of the longest and strongest supporters of the Nevada cannabis industry. He is a well-known cannabis consultant with over 15 prestigious clients, a founding member of the Clark County Green Ribbon Advisory Panel and helped write, gain support for and pass SB374 with Senator Tick Segerblom, bringing legalized medical marijuana to the patients of Nevada who needed it.

Jay hosted political fundraisers and campaign events in 2012 to build up support for SB374. Looking to form a group to help the push to reform Nevada's medical marijuana program, in March 2013 he visited the first dispensary opened in the state of Arizona, Arizona Organix, along with Nevada Judiciary Committee Members Mark Hutchison, Scott Hammond and Ruben Kihuen, non-member David Parks, Assemblywoman Michele Fiore, R-Las Vegas, Steve Yeager of the Clark County Public Defender's Office, Nevada media and staff.

Jay hosted a second trip to Arizona Organix with the Nevada Division of Public and Behavioral Health Director and staff along with the Clark County Business License Director, staff and Metropolitan Police narcotics representatives. A third trip was hosted by Mr. Matos for local municipalities. In attendance were City of Las Vegas, Clark County and Henderson representatives. In Nevada Jay provided an "In-Service Training" for Clark County staff from Business Licensing, Planning, Zoning, Fire, Metro and liaisons to many of the County Commissioners.

Jay is the owner of LeadNet, LLC a consulting firm in Nevada which specializes in cannabis consulting and compliance; mergers and acquisitions; licensing and critical management; government and public affairs. Through LeadNet, Jay and his staff negotiate retainer agreements with businesses to represent them as a liaison on state and local municipal issues including working with Nevada Dept. of Taxation, City Council, County Commissioners and staff in compliance, applying for special use permits, restricted licenses, privilege licenses, zoning, ordinances and many other government processes and procedures.

Having been raised in Las Vegas from the age of 12-22 Mr. Matos has a huge heart for the Las Vegas community and does what he can to assist and serve the under privileged children of the valley and their families. He is the Director of GR8 Community Development Corporation, a non-profit started by he and his wife in 2014. Through GR8 over 5,000 children have been assisted with toys for Christmas and back to school supplies. In 2014 and 2015 large toy drives were held to help support the Las Vegas Rescue Mission and toys were distributed to roughly 2,000 less fortunate children each year so that they would have something to open on Christmas morning. In August of 2018 GR8 participated in Commissioner Lawrence Weekly's Back to School Fair and distributed 2,000 lunch boxes, notebooks, pencils, sharpeners, rulers and pencil cases to make sure the children had what they needed to start the new school year on the right foot. This year a turkey and food drive is being held with hopes to assist 1,000 families with putting a Thanksgiving meal on their table and another Christmas Toy Drive will also be held to bring holiday cheer to as many children as possible.

GR8 Community Development Corporation also has a youth sports program which currently runs eighteen club baseball teams called CBA Nevada; with over 200 players it helps to keep kids off the streets, out of trouble, focused on their education and working hard towards their future and long-term goals. Fund raisers are held yearly and sponsorships are given to those children who have a love for baseball but may not otherwise be able to afford to play. GR8 also hosts an annual CBA College Baseball Camp in conjunction with the LVCVA (Las Vegas Convention and Vacation Authority) and Las Vegas 51's that brings in 30-40 of the top college coaches to work with and possibly recruit 100 of the most talented high school players. Through CBA and the camp over 300 players have been put into college.

Jay Matos was born in New York, lived most of his younger years surrounded by his heritage in Puerto Rico, moved to Las Vegas at the age of 12 and then at the age of 22 he moved to Boston, MA to pursue a technology career, he lived there for eight years until his return to Las Vegas in 1999. He has been married for 21 years to his wife, Cheri and they have four boys; Jaytee (25), Jayden (17), Jayzic (11) and Jaymin (5) as well as a granddaughter, Lyric (2).

David Radcliffe

David Radcliffe graduated from Columbia College with a Bachelor of Business Administration in Military History. After spearheading several software development projects, David joined the armed forces and worked as a Mineman with the US Navy, and then as a Corpsman with the USMC. As part of his duties, he trained extensively in counter terrorism, hand to hand combat, munitions, weaponry and security procedures.

After leaving the military with an Honorable Discharge, David used his skills in developing a team and providing personal security for high net worth clients, both in protection and recovery.

David is skilled in all aspects of business development, including strategic planning, budgeting and marketing communications and will use these skills assisting Red Earth in developing their security policies, procedures and staff; as well as general operations.

David also has a creative side, and has developed a business as a songwriter, music producer, and sound engineer.

Sabrina Mahmud

Sabrina Mahmud is a student and cannabis enthusiast. She is currently studying Biological Sciences at College of Southern Nevada.

Sabrina Mahmud was born in California and lived most of her life in upstate New York. At the young age of 16 she moved to the Upper Peninsula of Michigan to spend time with her mother. She lived on an Indian reservation, enhancing her knowledge about Native American culture. While in Michigan she attended Central Michigan University (CMU) and studied general studies with a heavy focus on Microbiology with a minor in Chemistry. While attending CMU she joined Rugby and has been playing ever since. She moved to Las Vegas to join a more experienced rugby team. Sabrina served on the Executive Committee for her team for two years and has brought them to nationals twice, in 2012 and again in 2014.

Since relocating to Las Vegas, Sabrina has indulged in multiple philanthropies and volunteer work. In 2017, she hosted a rugby tournament that required no tournament fees in exchange for canned goods, altogether collecting over 124 lbs. of canned goods that were donated to Helping Hands of Vegas Valley. This enabled seniors that live on a fixed income not have to choose between paying for food or paying their bills.

Sabrina became a medical marijuana patient due to chronic pain from a twisted L1 vertebrae. Using regulated medicinal marijuana has helped ease the burden of her pain in a natural, holistic/homeopathic way instead of the prescribed opioid and painkiller alternative. Since becoming a patient, Sabrina has been able to return to normal day to day activities pain free! It has even allowed her to return to rugby which is a passion of hers.

Because of her experience and passion for the benefits of medicinal marijuana, Sabrina began working at Panacea Quality Cannabis as a Lead budtender. She helped educate staff with both product knowledge and the art of selling. Panacea helped develop and widen her reception, cash handling, selling and processing skills up to the Nevada standard. She also helped create and update S.O.P.'s for the company and learned how to format logs and forms to improve the company's standards. Sabrina eventually became one of two keyholders for the company building. While at Panacea, Miss Mahmud developed a child resistant bag 'reuse and recycle' program to help eliminate plastic waste going into our landfills.

In 2018, while working at the first MedMen location in Las Vegas, Sabrina has further enhanced her knowledge of cannabis, and learned additional skills for running and managing a dispensary. She quickly moved up in the company becoming Assistant Manager and helping run day to day operations. While working there, she also was trained to perform job duties of a Compliance Manager. While at MedMen, Sabrina worked with several different platforms of cannabis software such as Metrc, Biotrack, MJ Freeway and My Med Men and oversaw updating websites such as Weedmaps and Leafly.

Catherine Boutsikakis

Catherine Boutsikakis is a licensed and registered Pharmacist in Nevada and New York State. She attended St. John's University College of Pharmacy and Allied Health Professions. While in school, she was active in the student chapter of the American Pharmaceutical Association and Lambda Kappa Sigma – a professional pharmacy sorority.

Both organizations were active in community outreach and educating the public on pharmacy and health care issues. Catherine graduated St. John's in May of 1993 with a Bachelor of Science in Pharmacy degree and began a long career in the pharmacy field.

Her first 13 years were spent working for Genovese Drug Stores (later Eckerd Pharmacy). Most of that time was spent as a Supervising Pharmacist where she was responsible for managing the pharmacy department – budgeting, scheduling, payroll, ordering, and inventory – in addition to her regular duties of dispensing and consulting.

In 2002, she was given an Outstanding Pharmacy Management Award. Her celebrated work as a manager led to being assigned extra projects. She was trained as a fertility specialist, which entailed becoming an expert on all medications used for fertility purposes including compounding capsules, creams, and suppositories. She was also selected to set up and open new chain locations. This gave her experience in government regulations as it involved filing paperwork with the State Board of Pharmacy and the DEA for licensing, registration, and controlled substance inventory. It also required physician outreach to familiarize health care providers in the area with the new store.

Another project required being sent to various stores, which were not compliant with policies and procedures, and reorganizing them to get them on track.

In 2007, she switched to an independent pharmacy practice setting. The focus there was more patient and community based as opposed to management, but she was responsible for the operations of the business when the owner was unavailable.

While still in New York, she was very active in the local elementary school. She spent three years on the School Leadership Team, a group comprised of teachers and parent representatives who develop educational policies for the school. They also make sure there are resources to support those policies. She also spent two years as the president of the Parent Teachers Association and was responsible for supporting the school by way of fundraising, hosting workshops, and organizing festivals and social events.

Upon moving to Las Vegas in 2015, she began freelance work for AB Consultant Group providing pharmaceutical consulting services. Beginning in December of 2017, she also began providing social media consulting by providing social media posts concerning medical cannabis and the health care field. In total she has been licensed and registered as a pharmacist for 25 years in New York State and for just over a year in Nevada. During this time, she has been actively keeping up with her continuing education classes across a broad spectrum of health care topics, including medical cannabis.

She is currently enrolled in the Cannabis Care Certification program through Americans For Safe Access Foundation.

5.2.10.6. *A Request and Consent to Release Application Form for Recreational Marijuana Establishment License(s) for each owner, officer and board member should be completed for each individual named in this application (Attachment D).*

STATE OF NEVADA
DEPARTMENT OF TAXATION
Web Site: https://tax.nv.gov
1550 College Parkway, Suite 115
Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

BRIAN SANDOVAL
Governor
JAMES DEVOLD
Chair, Nevada Tax Commission
WILLIAM D. ANDERSON
Executive Director

LAS VEGAS OFFICE
Grant Sawyer Office Building, Suite1300
555 E. Washington Avenue
Las Vegas, Nevada 89101
Phone: (702) 486-2300 Fax: (702) 486-2373

RENO OFFICE
4600 Kietzke Lane
Building L, Suite 235
Reno, Nevada 89502
Phone: (775) 687-9999
Fax: (775) 688-1303

HENDERSON OFFICE
2550 Paseo Verde Parkway, Suite 180
Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

ATTACHMENT D
REQUEST AND CONSENT TO RELEASE APPLICATION FORM
RECREATIONAL MARIJUANA ESTABLISHMENT LICENSE

I, Paris Balaouras, am the duly authorized representative of Red Earth, LLC to represent and interact with the Department of Taxation (Department) on all matters and questions in relation to the Nevada Recreational Marijuana Establishment License(s) Application. I understand that R092-17, Sec. 242 makes all applications submitted to the Department confidential but that local government authorities, including but not limited to the licensing or zoning departments of cities, towns or counties, may need to review this application in order to authorize the operation of an establishment under local requirements. Therefore, I consent to the release of this application to any local governmental authority in the jurisdiction where the address listed on this application is located.

By signing this Request and Consent to Release Application Form, I hereby acknowledge and agree that the State of Nevada, its sub-departments including the Department of Taxation and its employees are not responsible for any consequences related to the release of the information identified in this consent. I further acknowledge and agree that the State and its sub-departments and its employees cannot make any guarantees or be held liable related to the confidentiality and safe keeping of this information once it is released.

Date: 8/30/18

Signature of Requestor/Applicant or Designee

State of Nevada

County of Clark

Signed and sworn to (or affirmed) before me on 8/30/18 (date)

By Paris Balaouras (name(s) of person(s) making statement)

CRYSTAL AMORELLI
Notary Public, State of Nevada
Appointment No. 17-1219-1
My Appt. Expires Sep 19, 2020

Notary Stamp

Signature of notarial officer

HIGHLY CONFIDENTIAL – ATTORNEYS' EYES ONLY