

# BRIGHTON HEALTH ADVOCATES, INC.

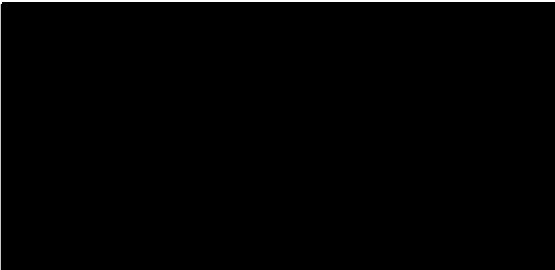
February 7, 2017

Department of Public Health  
Medical Use of Marijuana Program  
RMD Applications  
99 Chauncy Street, 11<sup>th</sup> Floor  
Boston, MA 02111

RE: Brighton Health Advocates, Inc. Applications of Intent #2 and #3

Enclosed please find wet signatures on page 5 for Applications of Intent #2 and #3. The Applications of Intent submitted originally did not include these wet signatures as required.

Please contact me should you have any other questions. We look forward to working with the Department through the application process for the additional two dispensaries. Feel free to contact me at [REDACTED] you have any questions.



RECEIVED  
FEB 10 2017  
MA Dept of Public Health  
99 Chauncy Street  
Boston, MA 02111

81 Technology Park  
East Falmouth, MA 02536




**SECTION D. INITIAL CAPITAL REQUIREMENT**

Describe the sources, types, and amounts of required initial capital in the table below, showing that the Corporation has at least \$500,000 in its control and available for this *Application of Intent* and at least \$400,000 in its control and available for each additional *Application of Intent*, if any, as evidenced by bank statements, lines of credit, or financial institution statements. Add more tables if needed.

If the required funds are being held in an account in the name of an individual or entity other than the Corporation, the individual or authorized signatory of the entity must provide their signature in the "Signature of Account Holder" column. Their signature below indicates that they are committing the amount of their funds identified in the table to the applicant.

In addition to completing this table, submit a **one-page** financial account summary for each account listed below documenting the available funds, dated no earlier than 30 days prior to the date the *Application of Intent* was submitted to the Department.

| Name on Account | Financial Institution | Type of Account   | Amount                | Signature of Account Holder   |
|-----------------|-----------------------|-------------------|-----------------------|---|
| PharmaCann LLC  | Bank of Springfield   | Business Checking | 5,062,770.84          |  |
|                 |                       |                   |                       |   |
|                 |                       |                   |                       |   |
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|                 |                       |                   |                       |   |
|                 |                       |                   |                       |   |
| -----           | -----                 | <b>TOTAL:</b>     | <b>5,062,770.84</b> 0 | ----  |

Information on this page has been reviewed by the applicant and where provided by the applicant, is accurate and complete, as indicated by the initials of the authorized signatory here: 