Background Check Authorizations Cover Sheet

**Complete This Form with Information on Each Individual and Corporate Entity Requiring A Background Check.**

Name of Corporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Executive Officer, Chief Financial Officer, And Chief Operating Officer

|  |  |  |
| --- | --- | --- |
| **Name** | **Title** | **Residential Address** |
|  |  |  |
|  |  |  |
|  |  |  |

Board of Directors

|  |  |
| --- | --- |
| **Name** | **Residential Address** |
|  |  |
|  |  |
|  |  |
|  |  |
| *Add More Rows If Needed* |  |

Individuals Responsible for Marijuana for Medical Use Cultivation Operations

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Title** | **Affiliated Entity, If Applicable** | **Residential Address** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| *Add More Rows If Needed* |  |  |  |

Entities Responsible for Marijuana for Medical Use Cultivation Operations

|  |  |  |  |
| --- | --- | --- | --- |
| **Entity Name** | **Role** | **Business Address** | **Federal Tax Id#** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| *Add More Rows If Needed* |  |  |  |

Individuals Responsible For Rmd Security Plan And Security Operations

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Title** | **Affiliated Entity, If Applicable** | **Residential Address** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| *Add More Rows If Needed* |  |  |  |

Entities Responsible for RMD Security Plan and Security Operations

|  |  |  |  |
| --- | --- | --- | --- |
| **Entity Name** | **Role** | **Business Address** | **Federal Tax Id#** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| *Add More Rows If Needed* |  |  |  |

Capital Contributors (Individuals)

|  |  |
| --- | --- |
| **Name** | **Residential Address** |
|  |  |
|  |  |
|  |  |
|  |  |
| *Add More Rows If Needed* |  |

Capital Contributors (Entities)

|  |  |  |  |
| --- | --- | --- | --- |
| **Entity Name** | **Business Address** | **Federal Tax Id #** | **Leadership Names** |
|  |  |  | Ceo/Ed:  President/Chair: |
|  |  |  | Ceo/Ed:  President/Chair: |
|  |  |  | Ceo/Ed:  President/Chair: |
|  |  |  | Ceo/Ed:  President/Chair: |
| *Add More Rows If Needed* |  |  | Ceo/Ed:  President/Chair: |