



# **Massachusetts Cannabis Control Commission**

# **Public Record Request**

#### ABOUT THE MARIJUANA ESTABLISHMENT

Business Legal Name: Patriot Care Corp Federal Tax Identification Number EIN/TIN:

Phone Number: Email Address: bmayerson@col-care.com

978-771-1434

Business Address 1: 7 Legion Avenue Business Address 2:

Business City: Greenfield Business State: MA Business Zip Code: 01301

Mailing Address 1: 70 Industrial Avenue East Mailing Address 2: Suite B

Mailing City: Lowell Mailing State: MA Mailing Zip Code: 01852

### CERTIFIED DISADVANTAGED BUSINESS ENTERPRISES (DBES)

Certified Disadvantaged Business Enterprises (DBEs): Not a

DBE

#### PRIORITY APPLICANT

Priority Applicant: yes

Priority Applicant Type: RMD Priority

**Economic Empowerment Applicant Certification Number:** 

RMD Priority Certification Number: RPA201838

## **RMD INFORMATION**

Name of RMD: Patriot Care Corp

Department of Public Health RMD Registration Number: 036

Operational and Registration Status: Obtained Final Certificate of Registration and is open for business in Massachusetts

To your knowledge, is the existing RMD certificate of registration in good standing?: yes

If no, describe the circumstances below:

#### PERSONS WITH DIRECT OR INDIRECT AUTHORITY

Person with Direct or Indirect Authority 1

Percentage Of Ownership: Percentage Of Control:

Role: Executive / Officer Other Role:

First Name: Robert Middle Name: Keith Last Name: Mayerson Suffix:

Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

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Person with Direct or Indirect Authority 2

Percentage Of Ownership: 18.6 Percentage Of Control: 18.6

Role: Executive / Officer Other Role:

First Name: Nicholas Middle Name: Keane Last Name: Vita Suffix:

Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 3

Percentage Of Ownership: 17.9 Percentage Of Control: 17.9

Role: Executive / Officer Other Role:

First Name: Michael Middle Name: James Last Name: Abbott Suffix:

Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 4

Percentage Of Ownership: Percentage Of Control:

Role: Executive / Officer Other Role:

First Name: George Middle Name: Charles Last Name: Agganis Suffix:

Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 5

Percentage Of Ownership: Percentage Of Control:

Role: Executive / Officer Other Role:

First Name: Mary-Alice Middle Name: Last Name: Miller Suffix:

Gender: Female User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 6

Percentage Of Ownership: Percentage Of Control:

Role: Executive / Officer Other Role:

First Name: David Middle Name: James Last Name: Hart Suffix:

Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

Person with Direct or Indirect Authority 7

Percentage Of Ownership: Percentage Of Control:

Role: Director Other Role:

First Name: David Middle Name: James Last Name: Catanzano Suffix:

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Gender: Male User Defined Gender:

What is this person's race or ethnicity?: White (German, Irish, English, Italian, Polish, French)

Specify Race or Ethnicity:

## **ENTITIES WITH DIRECT OR INDIRECT AUTHORITY**

Entity with Direct or Indirect Authority 1

Percentage of Control: 100 Percentage of Ownership: 100

Entity Legal Name: Columbia Care LLC Entity DBA: DBA

City:

Entity Description: Delaware Limited Liability Company

Foreign Subsidiary Narrative:

Entity Phone: Entity Email: Entity Website: www.col-care.com

Entity Address 1: Entity Address 2:

Entity City: Entity State: Entity Zip Code:

Entity Mailing Address 1: Entity Mailing Address 2:

Entity Mailing City: Entity Mailing State: Entity Mailing Zip Code:

Relationship Description: Columbia Care is the nation's largest and most experienced manufacturer and provider of medical marijuana products and services. Since first applying for licenses in Massachusetts in 2013 and being awarded 3 licenses, Columbia Care has provided all of the capital and know-how that has been required to build Patriot Care into the leading position it enjoys today in the medical marijuana market in Massachusetts. Following the recent conversion of Patriot Care from a not-for-profit entity to a for-profit entity, Columbia Care is the sole member of Patriot Care Corp and thus owns 100% of the equity and control. It exercises its authority through executives of Columbia Care that are also executives of Patriot Care. Four of these executives also comprise 100% of the Board of Patriot Care Corp.

Columbia Care Inc is the parent company of Columbia Care LLC, which is the parent company of Patriot Care Corp

## **CLOSE ASSOCIATES AND MEMBERS**

No records found

## **CAPITAL RESOURCES - INDIVIDUALS**

No records found

## **CAPITAL RESOURCES - ENTITIES**

No records found

#### **BUSINESS INTERESTS IN OTHER STATES OR COUNTRIES**

No records found

## **DISCLOSURE OF INDIVIDUAL INTERESTS**

No records found

#### MARIJUANA ESTABLISHMENT PROPERTY DETAILS

Establishment Address 1: 7 Legion Avenue

Establishment Address 2:

Establishment City: Greenfield Establishment Zip Code: 01301

Approximate square footage of the establishment: 6800 How many abutters does this property have?: 55

Have all property abutters been notified of the intent to open a Marijuana Establishment at this address?: Yes

## HOST COMMUNITY INFORMATION

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## **Host Community Documentation:**

Document Category	Document Name	Type	ID	Upload Date
Community Outreach Meeting Documentation	CommunityOutreach_GreenfieldDisp.pdf	pdf	5ae1248609fa3e0db3eec1fa	04/25/2018
Certification of Host Community Agreement	PCC_Greenfield_HCACertif.pdf	pdf	5b1abe40480890506ed9aa19	06/08/2018
Plan to Remain Compliant with Local Zoning	Local Zoning Compliance_7 Legion.pdf	pdf	5b1ac09a63f5ba502c343704	06/08/2018

Total amount of financial benefits accruing to the municipality as a result of the host community agreement. If the total amount is zero, please enter zero and provide documentation explaining this number.: \$48227.61

#### PLAN FOR POSITIVE IMPACT

Plan to Positively Impact Areas of Disproportionate Impact:

Document Category	Document Name	Type	ID	Upload Date
Plan for Positive Impact	PlanForPositiveImpact_Greenfield.pdf	pdf	5ae666ad2654f0360aecf943	04/29/2018

## ADDITIONAL INFORMATION NOTIFICATION

Notification: I understand

# INDIVIDUAL BACKGROUND INFORMATION

Individual Background Information 1

Role: Other Role:

First Name: Robert Middle Name: Keith Last Name: Mayerson Suffix:

RMD Association: RMD Manager

**Background Question: yes** 

Individual Background Information 2

Role: Other Role:

First Name: Nicholas Middle Name: Keane Last Name: Vita Suffix:

RMD Association: RMD Manager

**Background Question: yes** 

Individual Background Information 3

Role: Other Role:

First Name: Michael Middle Name: James Last Name: Abbott Suffix:

RMD Association: RMD Manager

Background Question: no

Individual Background Information 4

Role: Other Role:

First Name: David Middle Name: James Last Name: Hart Suffix:

RMD Association: RMD Manager

Background Question: no

Individual Background Information 5

Role: Other Role:

First Name: Mary-Alice Middle Name: Last Name: Miller Suffix:

RMD Association: RMD Manager

Background Question: no

Individual Background Information 6

Role: Other Role:

First Name: George Middle Name: Charles Last Name: Agganis Suffix:

RMD Association: RMD Manager

Background Question: no

Individual Background Information 7

Role: Other Role:

First Name: David Middle Name: James Last Name: Catanzano Suffix:

RMD Association: RMD Manager

Background Question: no

#### **ENTITY BACKGROUND CHECK INFORMATION**

**Entity Background Check Information 1** 

Role: Parent Company Other Role:

Entity Legal Name: Columbia Care LLC Entity DBA: Federal Tax Identification Number EIN/TIN:

Entity Description: Delaware Limited Liability Company

Phone: 212-634-7100 Email: info@col-care.com

Primary Business Address 1: 745 Fifth Avenue Primary Business Address 2: 17th Floor

Primary Business City: New York Primary Business State: NY Principal Business Zip

Code: 10151

Additional Information: Columbia Care Inc. is the parent company of Columbia Care LLC, which is the parent company of Patriot Care

Corp

### MASSACHUSETTS BUSINESS REGISTRATION

Required Business Documentation:

Document Category	Document Name	Туре	ID	Upload
				Date
Secretary of Commonwealth - Certificate	PATRIOT CARE CORP-MA-Certificate of Good	pdf	5ad8fa3309fa3e0db3eebdb9	04/19/2018
of Good Standing	Standing4_13_18.pdf			
Department of Revenue - Certificate of	MA DOR Certificate of Good Standing.pdf	pdf	5ad8fa407cc84f3628fda92a	04/19/2018
Good standing				
Articles of Organization	FILED Articles of Entity Conversion - 4_12_18.pdf	pdf	5ad8fa507212167e7aeed948	04/19/2018
Bylaws	Patriot Care Post Conversion By-Laws.pdf	pdf	5ad8fa5a660eb50d8b6fed75	04/19/2018

Certificates of Good Standing:

Document Category	Document Name	Туре	ID	Upload Date
Department of Unemployment Assistance -	Patriot Care MA DUA Certificate of	pdf	5d25d4373e9601053bdb5b23	07/10/2019
Certificate of Good standing	Compliance 7.8.2019.pdf			

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Secretary of Commonwealth - Certificate of Good	Cert of Good Standing.pdf	pdf	5d27cdfad89d4b09aca62856	07/11/2019
Standing				
Department of Revenue - Certificate of Good	Patriot Care MA DOR Certificate of Good	pdf	5d27ce15ece777050c09384b	07/11/2019
standing	Standing 4.16.19.pdf			

Massachusetts Business Identification Number: 463348302

Doing-Business-As Name: Patriot Care Corp

DBA Registration City: Greenfield

## **BUSINESS PLAN**

**Business Plan Documentation:** 

Document Category	Document Name	Type	ID	Upload Date
Plan for Liability Insurance	COI_In Force Coverage_PCC Locations.pdf	pdf	5ad8fa7a2654f0360aecf236	04/19/2018
Proposed Timeline	Timeline_Greenfield.pdf	pdf	5ae68596d16c987e98c1bdc8	04/29/2018
Business Plan	Business Plan Summary_Combined.pdf	pdf	5af07580ddfb91046e6105a2	05/07/2018
Proposed Timeline	Timeline_Greenfield_Rev_7_26_18.pdf	pdf	5b59c00264718b346fe26e61	07/26/2018

## **OPERATING POLICIES AND PROCEDURES**

Policies and Procedures Documentation:

Document Category	Document Name	Туре	ID	Upload	
				Date	
Plan for obtaining marijuana or marijuana	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af072bb53899e3d7b66121c	05/07/2018	
products					
Plan for obtaining marijuana or marijuana	Greenfield RMD_ME_P&P -	pdf	5af072df3deece0450ce86e9	05/07/2018	
products	Dispensary_5_3_18.pdf				
Separating recreational from medical	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af072f89a67bb11cc7e44fa	05/07/2018	
operations, if applicable					
Restricting Access to age 21 and older	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af07306da8de63d8fd16926	05/07/2018	
Security plan	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af07311ddfb91046e61059a	05/07/2018	
Prevention of diversion	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0731b00caab11e09c97ae	05/07/2018	
Storage of marijuana	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0732852bc563da3bfdc2f	05/07/2018	
Transportation of marijuana	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0733511a2fe04237f6e26	05/07/2018	
Inventory procedures	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af073424acea511a8368dec	05/07/2018	
Quality control and testing	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0734fa6b56e3d6757194b	05/07/2018	
Dispensing procedures	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0735d75ce4404378580e0	05/07/2018	
Personnel policies including background	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0736aa9bf2311b8c6d6a4	05/07/2018	
checks					
Record Keeping procedures	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0737753899e3d7b661220	05/07/2018	
Maintaining of financial records	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af073883deece0450ce86ed	05/07/2018	
Diversity plan	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af0739d9a67bb11cc7e44fe	05/07/2018	
Qualifications and training	ApplicationIndex_P&P_Dispensary_Greenfield.pdf	pdf	5af073abda8de63d8fd1692a	05/07/2018	

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#### MARIJUANA RETAILER SPECIFIC REQUIREMENTS

No documents uploaded

No documents uploaded

#### **ATTESTATIONS**

I certify that no additional entities or individuals meeting the requirement set forth in 935 CMR 500.101(1)(b)(1) or 935 CMR 500.101(2)(c)(1) have been omitted by the applicant from any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: I Agree

I understand that the regulations stated above require an applicant for licensure to list all executives, managers, persons or entities having direct or indirect authority over the management, policies, security operations or cultivation operations of the Marijuana Establishment; close associates and members of the applicant, if any; and a list of all persons or entities contributing 10% or more of the initial capital to operate the Marijuana Establishment including capital that is in the form of land or buildings.: I Agree

I certify that any entities who are required to be listed by the regulations above do not include any omitted individuals, who by themselves, would be required to be listed individually in any marijuana establishment application(s) for licensure submitted to the Cannabis Control Commission.: | Agree

Notification: I Understand

I certify that any changes in ownership or control, location, or name will be made pursuant to a separate process, as required under 935 CMR 500.104(1), and none of those changes have occurred in this application.: I Agree

I certify that to the best knowledge of any of the individuals listed within this application, there are no background events that have arisen since the issuance of the establishment's final license that would raise suitability issues in accordance with 935 CMR 500.801.: I Agree

I certify that all information contained within this renewal application is complete and true.: I Agree

#### ADDITIONAL INFORMATION NOTIFICATION

Notification: I Understand

# COMPLIANCE WITH POSITIVE IMPACT PLAN

Progress or Success Goal 1

Description of Progress or Success: Patriot Care has provided courses at local colleges (Bunker Hill Community College) and Greenfield Community College. For Greenfield Community College, we're just going to do the two day session, which will be held on November 6 and 7. They charged students \$65 for the two day session last time and they want to increase the cost to \$99. Please note, the money goes to the college and not Patriot Care. In fact, Patriot Care gave \$1000 to defray the cost to the college. We sold out all spots last time. For Bunker Hill Community College we plan to hold the one day session on September 24 and the two day sessions on October 21 and 22. Interestingly, Cape Cod Community College heard about the program from our contact at Greenfield Community College and asked us if we'd do it there as well. We'll be holding the one day session twice ... once at the Hyannis campus on September 18 and then on the Plymouth campus on September 19. The two day session will be held on October 16 and 17 at the Plymouth campus. We have expended a significant number of executive hours developing and running this program.

# COMPLIANCE WITH DIVERSITY PLAN

Diversity Progress or Success 1

Description of Progress or Success: Columbia Care values diversity in every form and supports initiatives to ensure all employees feel included in the workplace. Columbia Care's Diversity Committee works together and with others in the organization to drive internal inclusion efforts as well as external candidate sourcing. The committee is charged with identifying ways to enhance the employee experience and employment brand; and building recruiting plans with a diverse focus on gender, ethnicity, veterans, and disability status. The Diversity Committee is currently working to establish diversity affinity groups which will allow employees to work with like individuals towards a common business goal while enhancing relationships and diverse mentorship opportunities across the organization. Columbia Care was recently a title sponsor for Women Grow national leadership conference in support of women in the cannabis industry who are looking to expand their own business and/or grow into leadership within the industry.

Since September 2018, Patriot Care has created 13 new jobs in Massachusetts, hired 18 females and at least 15 individuals in minority ethnic groups. Patriot Care regularly facilitates cannabis education seminars at Greenfield Community College. In addition, Patriot Care provides financial and human support to local diverse organizations such as: Irish International Immigration Center, Compassionate Care ALS, AIDS Action Committee, Project Hope, Merrimack

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## **HOURS OF OPERATION**

Monday From: 10:00 AM Monday To: 7:00 PM

Tuesday From: 10:00 AM Tuesday To: 7:00 PM

Wednesday From: 10:00 AM Wednesday To: 7:00 PM

Thursday From: 10:00 AM Thursday To: 7:00 PM

Friday From: 10:00 AM Friday To: 7:00 PM

Saturday From: 11:00 AM Saturday To: 6:00 PM

Sunday From: 11:00 AM Sunday To: 6:00 PM

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