Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066
E-mail: dcp.mmp@ct.gov • **Website:** www.ct.gov/dcp/mmp

Appendix C
Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section K.

Section A: Personal Information

1. Name (First, Middle, Last): Christian Barrett Tuck			
2. Street Address (including Apartment or Suite #): 300 W. 55 ST. Apt. # 6G			
3. City: New York		4. State: NY	5. Zip Code: 10019
6. Title: Director	7. Telephone Number: (212) 307-7529	8. E-mail Address: cbtuck@mac.com	
9. Date of Birth: [redacted]	10. Social Security Number: [redacted]	11. Gender: ☑ Male ☐ Female	

Section B: Employment Information

12. Current or Most Recent Employer: Stone House Partners Ltd.		13. Date of Employment: Start Date: 7/12 End Date: :	
14. Employer Address (including Apartment or Suite #): 1045 Mundys Landing			
15. City: Versailles		16. State: KY	17. Zip Code: 40385
18. Daytime Telephone Number: (859) 879-9980	19. Fax Number: —	20. E-mail Address: stonehousepartnersltd.com	

Section C: Marijuana or Agriculture Business Experience

21. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana or agriculture business?

☐ Yes ☑ No

22. Other than the applicant, are you currently associated with a marijuana or agriculture business in any state or country?

☐ Yes ☑ No

23. If you answered "yes" to question 21 or 22, attach a statement setting forth the following information for each marijuana or agriculture business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why; and
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations.

Section D: Other Relevant Business Experience

24. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

☑ Yes ☐ No

25. If you answered "yes" to question 24, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

Section E: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits and registrations ever held, current or expired by you. Attach additional pages if necessary.

26. S[redacted]

N[redacted]

30. S[redacted]

N[redacted]

Section F: Legal Proceedings

34. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

☐ Yes ☑ No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

35. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

☐ Yes ☑ No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

Stone House Partners Ltd.

(859) 879-9980 www.stonehousepartnersltd.com 1045 Mundys Landing Versailles, KY 40385

Christian B. Tuck
300 W 55th St. Apt 6G
New York, NY 10019
(212) 307-7529

November 12, 2013

MMP
165 Capital Ave., Room 145
Hartford, CT 06106-1630

Re: Statement Section D

- Have spent over one and a half years researching industrial hemp and the industrial hemp seed industry in Canada.

- Continue to meet with Lexington, Kentucky and the surrounding area politicians pursuing a state-based advocacy program regarding future changes in industrial hemp legislation in the U.S. Congress.

- Organized a co-op of farmers for the growing of industrial hemp.

- Continue to analyze soil and water samples on the identified farms for pesticide residue, heavy metals, microbiological counts and any other potential contaminants.

- Identified agriculture equipment for propagation, cultivation and harvest of industrial hemp.

- Researched hemp seed processing equipment including anticipation of seed sterilization and hulling technology.

- Identified industrial hemp strains in Canada and their impact on climatic changes (warmer climate, longer time in the field)

- Identified pest concerns of industrial hemp and how to pro-actively mitigate them.

- Identified the nutrient requirements by soil content and added supplements for industrial hemp.

- Identified a facility for the processing of hemp seeds and have begun to design the processing for development thereof.

- Identified storage and packaging requirements to maintain maximum freshness and nutritional levels.

- Identified uses for industrial hemp by-products and are in early discussion with buyers for these by-products.

Sincerely yours,

Christian B. Tuck

Christian B. Tuck

36. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed $500,000 above any insurance coverage available to cover the claim?

☐ Yes ☑ No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

37. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over $10,000 assessed by any regulatory agency?

☐ Yes ☑ No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

Section G: Criminal Actions

38. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? ☐ Yes ☑ No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

Section H: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

39. Signature:	40. Date Signed:
▶ Christian B. Tuck	11-12-13

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

41. Signature:	42. Date Signed:
▶ Christian B. Tuck	11-12-13