



CANNABIS COMPLIANCE BOARD
STATE OF NEVADA

ccb.nv.gov
1550 College Parkway, Suite 142
Carson City, Nevada 89706
Phone: (775) 687-6299

HON. MICHAEL DOUGLAS
Chair

STEVE SISOLAK
Governor

Grant Sawyer Office Building, Suite 4200
555 E. Washington Avenue
Las Vegas, Nevada 89101

TYLER KLIMAS
Executive Director

Cannabis Establishment Agent Annual Affirmation Affidavit

Instructions: Pursuant to NCCR 5.130(6) this affidavit must be completed no later than the date of the first anniversary of the issuance or renewal of a cannabis establishment agent registration card. If you are unable to attest that there is no change to the information previously provided to the Board which would subject you to disciplinary action by the Board, please indicate the reasons why in the space below the affidavit. If you are unable to make the required attestation, your renewal may be denied.

I, \_\_\_\_\_ (Print Name) the undersigned hereby confirm and attest that:

- 1. My Cannabis Establishment Agent Registration Card number is: \_\_\_\_\_
2. In the preceding year, there has been no change in the information previously provided to the Board which would subject me to disciplinary action by the Board.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF \_\_\_\_\_
COUNTY OF \_\_\_\_\_ ss.

SUBSCRIBED AND SWORN to before me this day
of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

I am unable make the foregoing attestation for the following reasons:
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_