



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 SECTION FOR MEDICAL MARIJUANA REGULATION  
 MEDICAL MARIJUANA REGULATORY PROGRAM  
**MM FACILITY WORKSHEET 13**

**IMPORTANT NOTE:** Written responses to these questions must not refer to applicant facility business names and must refer to all individuals by title and initials only, e.g. “Owner A.E.M.” or “Principal Officer R.W.M.” If an applicant follows these directions, no redactions are necessary. However, if an applicant chooses to provide responses with applicant facility business names or individuals’ names, the applicant must provide a redacted and unredacted version of those responses. Redactions must be applied to applicant facility business names and the names, addresses, and Social Security numbers of any individuals mentioned in the application. It is the applicant’s responsibility to redact response worksheets and attachments to response worksheets for all applicable Facility Application Questions. Any responses to Facility Application Questions that do not properly redact information will not be scored. Only include information that must be redacted in responses and on worksheets when absolutely necessary.

In order to label all worksheets with an application identifier that need not be redacted, enter here a Facility Application ID consisting of four letters followed by four numbers. The same Facility Application ID should be entered on every worksheet for this application and all pages of any worksheet attachments:

Facility Application ID:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>(Enter letters)</i>				<i>(Enter Numbers)</i>			

**QUESTIONS FOR ALL FACILITY TYPES**

**MM WORKSHEET 13 – BUSINESS PLAN PROPOSED BY THE APPLICANT**

**DIRECTIONS:** Complete this worksheet. Upload this worksheet to the on-line Missouri MMP Portal, as directed in the application.

**No attachments are allowed for any question on this worksheet.**

**43.** Describe your estimated monthly revenues and expenses for the business in the first 2 years of operation. What are the estimates based on? **You may submit up to 500 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

44. Including a timeline, what is your staffing plan for the business in the first 2 years of operation? **You may submit up to 500 words.**  
**Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

45. How will the business source non-marijuana products and equipment necessary for the business? **You may submit up to 300 words.**  
**Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

46. How will the business fulfill orders? **You may submit up to 300 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

47. What is your marketing plan, including to whom, method of delivery, and costs? **You may submit up to 1,000 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

48. How will the business set pricing, initially and thereafter, based on supply and demand? **You may submit up to 500 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

49. What are the necessary steps that will need to occur for the business to succeed? **You may submit up to 500 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

50. Describe the financial plan for the business. Specifically address financing if FDIC banks and NCUA insured credit unions currently do not provide loans or financing to the legal cannabis industry and how you will complete financial transactions. **You may submit up to 1,000 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

51. Describe the odor control plan, including why a plan may not be needed for your type of business or location. **You may submit up to 300 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

52. Describe the plan to prevent minors from illegally obtaining your product. **You may submit up to 500 words. Include only 1 space between sentences.**

To view your word count, click out of the text box and then click back into the text box.

53. Will the business offer health insurance for your employees?

Yes    No