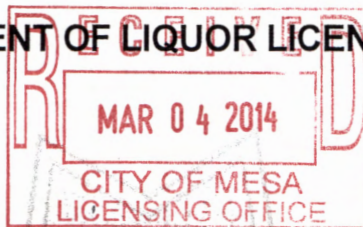


ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



116650
400 W Congress #521
Tucson AZ 85701-1352
(520) 628-6595

#6
PS PAD

APPLICATION FOR SPECIAL EVENT LICENSE

Fee = \$25.00 per day for 1-10 day events only

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. § 44-6852)

NOTE: THIS DOCUMENT MUST BE FULLY COMPLETED OR IT WILL BE RETURNED.
PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING.

****Application must be approved by local government before submission to Department of Liquor Licenses and Control. (Section #20)**

DLLC USE ONLY
LICENSE #

1. Name of Organization: ARIZONA COMMUNITY FOUNDATION

2. Non-Profit/I.R.S. Tax Exempt Number: 86-0348306

3. The organization is a: (check one box only)

- ☒ Charitable ☐ Fraternal (must have regular membership and in existence for over 5 years)
☐ Civic ☐ Political Party, Ballot Measure, or Campaign Committee
☐ Religious

4. What is the purpose of this event? DINNER WITH CELEB ATHLETES FOR DONORS
ON-SITE CONSUMPTION

5. Location of the event: 845^S CREISMON ROAD MESA MAR 85208
Address of physical location (Not P.O. Box) City County Zip

Applicant must be a member of the qualifying organization and authorized by an Officer, Director or Chairperson of the Organization named in Question #1. (Signature required in section #18)

6. Applicant: PASSEY WILLIAM J REDACTED
Last First Middle Date of Birth

7. Applicant's Mailing Address: 28 N CENTER MESA AZ 85201
Street City State Zip

8. Phone Numbers: (480) 472 9400 (480) 969 2291 REDACTED
Site Owner # Applicant's Business # Applicant's Home #

9. Date(s) & Hours of Event: (Remember: you cannot sell alcohol before 10:00 a.m. on Sunday)

	Date	Day of Week	Hours from A.M./P.M.	To A.M./P.M.
Day 1:	<u>4-25-14</u>	<u>FRIDAY</u>	<u>6:00 PM</u>	<u>9:00 PM</u>
Day 2:				
Day 3:				
Day 4:				
Day 5:				
Day 6:				
Day 7:				
Day 8:				
Day 9:				
Day 10:				



#116650

Licensing Office
55 North Center Street
PO Box 1466
Mesa, Arizona 85211-1466
480-644-2316 Telephone
480-644-3999 Fax
www.cityofmesa.org

SPECIAL EVENT AND EXTENSION OF PREMISES INFORMATION SHEET

If you are having alcohol sales you will need to obtain a Special Event Liquor License or an Extension of Premises from City of Mesa Licensing Office. This must be submitted at least 60 days prior to the event. A license is required with special provision outlined. Plan a minimum of 60 days to complete this process.

Check all that apply:

- ☒ Free/Host Alcohol - *wine only* ☐ Beer
☐ Alcohol Sales ☐ Beer and Wine
☐ Host and Sale Alcohol ☐ Beer, Wine and Distilled Spirits

Do you plan to secure a:

☐ **Special Event Liquor License** - The Special Event Liquor License fee is \$25 and must be approved by the City Council. After city approval, your application must be submitted to and approved by the State of Arizona. There are fees involved at the State. A non-profit association must obtain this license. (Complete attached State of Arizona Special Event Liquor Application and site plan.)

OR

☐ **Extension of Premises License** - There is no fee involved with the Extension of Premises. This is allowed when a liquor license is already in affect and you want to extend the area where liquor is sold. (Complete attached State of Arizona Extension of Premises Application and site plan.)

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event A SPECIAL
ENCLOSED AREA AND WINE WILL BE POURED AT EACH TABLE
BY STAFF WAITER ONLY

If applying for a Special Event Liquor License the following must be provided:

ARIZONA COMMUNITY FOUNDATION 86-0348306
Charity's or Organization's Name 501 (C)(3)#
P. VELASKI CEO REDACTED
Name of Contact at Charity/Organization Title with Organization Phone Number
BILL PASSEY Board Member
On-Site Agent Responsible for Liquor

How will attendees over the age of 21 be identified? ID WILL BE REQUIRED & EXAMINED
by MR PASSEY

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? NO ONE
UNDER 21 WILL BE ALLOWED TO ATTEND

Will food be served? ☒ Yes ☐ No If yes, what type of food will be served CHICKEN/FISH/VEG/CHIPS
DESSERT

Seating capacity of designated area: # 45

10. Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked?

☐ YES ☒ NO (attach explanation if yes)

11. This organization has been issued a special event license for 1 days this year, including this event (not to exceed 10 days per year).

12. Is the organization using the services of a promoter or other person to manage the event? ☐ YES ☒ NO
If yes, attach a copy of the agreement.

13. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds.

THE ORGANIZATION APPLYING MUST RECEIVE 25% OF THE GROSS REVENUES OF THE SPECIAL EVENT LIQUOR SALES.

Name ARIZONA COMMUNITY FOUNDATION 100
Percentage

Address 2201 E CAMELBACK PHX AZ 85006

Name _____
Percentage

Address _____

(Attach additional sheet if necessary)

14. Knowledge of Arizona State Liquor Laws Title 4 is important to prevent liquor law violations. If you have any questions regarding the law or this application, please contact the Arizona State Department of Liquor Licenses and Control for assistance.

NOTE: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY.

"NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT PREMISES."

15. What security and control measures will you take to prevent violations of state liquor laws at this event?
(List type and number of security/police personnel and type of fencing or control barriers if applicable)

____ # Police ☒ Fencing
____ # Security personnel ☒ Barriers

METAL GATE TO POOL AREA. WAITERS WILL BE
SERVING THE WINE. WINE INVENTORY WILL BE
IN ENCLOSED AREA DISPERSED BY MR. PASSEY

16. Is there an existing liquor license at the location where the special event is being held?

☐ YES ☒ NO

If yes, does the existing business agree to suspend their liquor license during the time period, and in the area in which the special event license will be in use?

☐ YES ☐ NO


(ATTACH COPY OF AGREEMENT)

Name of Business () Phone Number

17. Your licensed premises is that area in which you are authorized to sell, dispense, or serve spirituous liquors under the provisions of your license. The following page is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control measures and security positions.

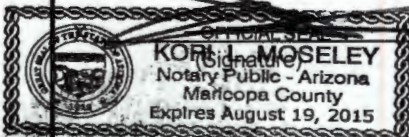
THIS SECTION TO BE COMPLETED ONLY BY AN OFFICER, DIRECTOR OR CHAIRPERSON OF THE ORGANIZATION NAMED IN QUESTION #1

18. I, PAUL VELASKI declare that I am an Officer/Director/Chairperson appointing the applicant listed in Question 6, to apply on behalf of the foregoing organization for a Special Event Liquor License.

X Paul Velaski CEO 3-4-14 (602) 381 1400
(Print full name) (Title/Position) (Date) (Phone #)
 Arizona County of Maricopa
The foregoing instrument was acknowledged before me this
4 3 2014
Day Month Year
My Commission expires on: 8-19-15 Kori L. Moseley
(Date) (Signature of NOTARY PUBLIC)

THIS SECTION TO BE COMPLETED ONLY BY THE APPLICANT NAMED IN QUESTION #6

19. I, WILLIAM S. PASSEY declare that I am the APPLICANT filing this application as listed in Question 6. I have read the application and the contents and all statements are true, correct and complete.

 State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this
4 3 2014
Day Month Year
My commission expires on: 8-19-15 Kori L. Moseley
(Date) (Signature of NOTARY PUBLIC)

You must obtain local government approval. City or County MUST recommend event and complete item #20. The local governing body may require additional applications to be completed and submitted 60 days in advance of the event. Additional licensing fees may also be required before approval may be granted.

LOCAL GOVERNING BODY APPROVAL SECTION

20. I, _____ hereby recommend this special event application
(Government Official) (Title)
on behalf of _____
(City, Town or County) (Signature of OFFICIAL) (Date)

FOR DLLC DEPARTMENT USE ONLY

Department Comment Section:

(Employee) (Date)

☐ APPROVED

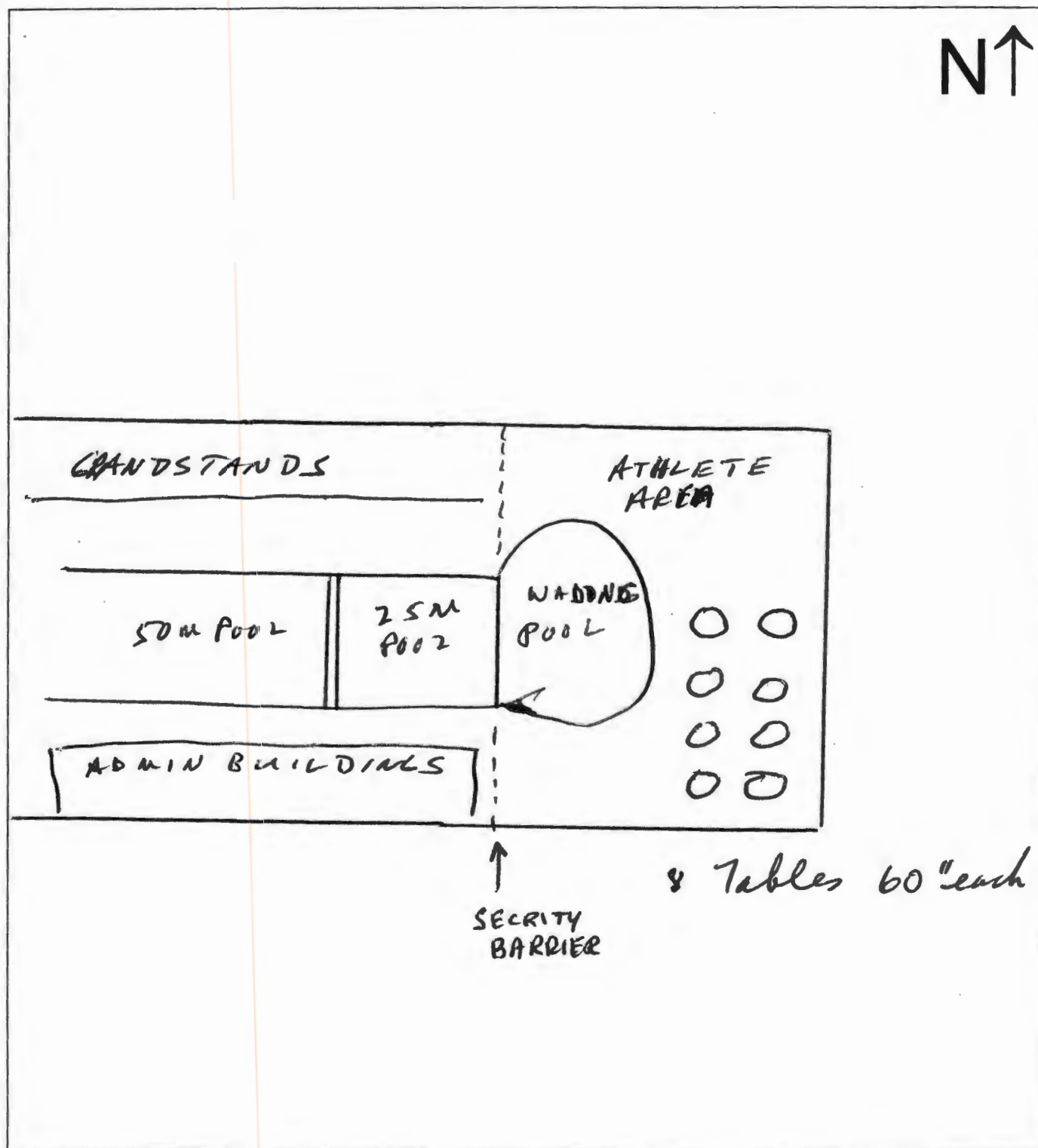
☐ DISAPPROVED

BY:

(Title) (Date)

SPECIAL EVENT LICENSED PREMISES DIAGRAM
(This diagram must be completed with this application)

Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions)
NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.



03/07/2014

Arizona Corporation Commission
State of Arizona Public Access System

9:03 AM

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Corporate Inquiry

File Number: -0117189-1

[Check Corporate Status](#)

Corp. Name: THE ARIZONA COMMUNITY FOUNDATION, INC.

Domestic Address

2201 E CAMELBACK RD STE 405B

PHOENIX, AZ 85016

Statutory Agent Information

Agent Name: PAUL VELASKI

Agent Mailing/Physical Address:

ARIZONA COMMUNITY FOUNDAT

2201 E CAMELBACK RD STE 405B

PHOENIX, AZ 85016

Agent Status: APPOINTED 01/17/2012

Agent Last Updated: 02/10/2012

Additional Corporate Information

Corporation Type: NON-PROFIT

Business Type: OTHER

Incorporation Date: 08/03/1978

Corporate Life Period: PERPETUAL

Domicile: ARIZONA

County: MARICOPA

Approval Date: 08/03/1978

Original Publish Date: 08/22/1978

Officer Information

JACK E DAVIS

CHAIRMAN

2201 E CAMELBACK RD #405B

PHOENIX, AZ 85016

Date of Taking Office: 06/01/2011

TONY ASTORGA

OTHER OFFICER

2201 E CAMELBACK RD #405B

PHOENIX, AZ 85016

Date of Taking Office: 03/01/2009