

# Special Event Liquor License Application Attachment B

Licensing Office  
55 North Center Street  
**Mailing Address:**  
PO Box 1466  
Mesa, Arizona 85211-1466  
480-644-2316 Telephone  
480-644-3999 Fax  
www.mesaaz.gov



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

Check all that apply:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Free/Host Alcohol | <input checked="" type="checkbox"/> Alcohol Sales | <input type="checkbox"/> Host and Sale Alcohol            |
| <input type="checkbox"/> Beer              | <input checked="" type="checkbox"/> Beer and Wine | <input type="checkbox"/> 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. This license can only be obtained by a non-profit organization, 501(C). (Complete the [State of Arizona Special Event Liquor Application](#) and site plan and submit it with this Attachment B.)

**Extension of Premises License** - There is no fee involved with the Extension of Premises. This is allowed when a liquor license is already in effect and you want to extend the area where liquor is sold. (Complete the [State of Arizona Extension of Premises Application](#) and site plan and submit it with this Attachment B.)

If this is an Extension of Premises, are there any other activities taking place except for the sale of liquor in the extended area? No  Yes  Type of activities taking place: \_\_\_\_\_

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event \_\_\_\_\_  
Create barriers outside the plaza. Requiring wrist bands w/ID for alcohol purchases.

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

<u>St Bridget Roman Catholic Parish</u>	<u>53-0196617</u>
Charity's or Organization's Name	501 (C)#
<u>Diana Rosales</u>	<u>Director of Pastoral Activities</u>
Name of Contact at Charity/Organization	Title with Organization
<u>Dennis Schauer</u>	<u>[REDACTED]</u>
On-Site Agent Responsible for Liquor	Phone Number

How will attendees over the age of 21 be identified? Wristbands and ID's will be checked.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? \_\_\_\_\_  
Knights of Columbus Security and volunteers.

Will food be served? Yes  No  If yes, what type of food will be served American food catering  
Seating capacity of designated area: # 275

CSR: \_\_\_\_\_  
 Amount: \_\_\_\_\_



**SPECIAL EVENT LICENSE**  
**APPLICATION FEE \$25.00 PER DAY**

Arizona Department of Liquor Licenses and Control  
 800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
 (602) 542-5141

**DLLC USE ONLY**

Job #: \_\_\_\_\_  
 Date Accepted: \_\_\_\_\_  
 CSR: \_\_\_\_\_  
 License #: \_\_\_\_\_

Application **MUST** be submitted to the Department of Liquor 10 days prior to the event.

**SECTION 1** Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

1. Applicant: Dennis Schauer  
(Must be an Officer/Member of the Non Profit Entity) Last First Middle
2. Applicant's mailing address: 6263 E. Oasis Street Mesa AZ 85215  
Street City State Zip
3. Applicants home/cell phone: [REDACTED] Applicant's business phone: \_\_\_\_\_
4. Applicant's email address: pastoralactivities@stbridget.org
5. Special Event Name: Irish Festival
6. Name of Non-Profit Organization, Candidate or Political Party/Gov.: St Bridget Roman Catholic Parish
7. Non-Profit/IRS Tax Exempt Number: 53-0196617
8. Arizona Corporation Commission File #: 14600276 If out of State please specify: \_\_\_\_\_  
(Attach letter of good standing)
9. Event Location Name: St Bridget Parish, Plaza
10. Event Address: 2213 N. Lindsay Road, Mesa AZ 85213

**Dates and Hours of Event - Days must be consecutive and may not exceed 10 consecutive days.**

**\*\*SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY\*\***

Days	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
** DAY 1:	DS-02/10/2024 <del>02/18/2024</del>	Saturday	5:30 p.m.	8:00 p.m.
DAY 2:	_____	_____	_____	_____
DAY 3:	_____	_____	_____	_____
DAY 4:	_____	_____	_____	_____
DAY 5:	_____	_____	_____	_____
DAY 6:	_____	_____	_____	_____
DAY 7:	_____	_____	_____	_____
DAY 8:	_____	_____	_____	_____
DAY 9:	_____	_____	_____	_____
DAY 10:	_____	_____	_____	_____

**SECTION 2** What type of security and control measures will you take to prevent violations of liquor laws at this event?  
(List type and number of police/security personnel and type of fencing or control barriers, if applicable.)

Number of Police 6 Number of Security Personnel  Fencing  Barriers

**Must** explain security measures: Event is in a secure location. Barriers will be placed at access points near parking lot and signs will be posted. ID will be required and wrist bands given for alcohol purchase.

**SECTION 3** What is the purpose of this event?

On-site consumption  Off-site (auction/wine/distilled spirits pull)  Both

How is this special event going to conduct all dispensing, serving, and selling of spirituous liquors?  
Check one of the following boxes. (R-19-318)

- A)  Special Event being held on an **unlicensed** premises will require approval and signature by the Local Governing Body on page 3. (If checked move to section 4)
- B)  Will this event be held on a currently licensed premises and within the already approved and licensed area?  
(**Must attach a letter from the licensed premises with an explanation of the option checked below**)

Name of Business

License Number

Phone (Include Area Code)

- Place license in non-use - *Special Event Licensee selling all alcohol without retailer involvement*  
**Must attach letter from the location suspending license for duration of special event**
- Dispense and serve all spirituous liquors under retailer's license - *Business operates normally, minimum of 25% of gross revenue from alcohol sales is donated to licensee*
- Dispense and serve all spirituous liquors under special event - *The special event licensee is in charge of selling alcohol that was purchased or donated by the special event licensee. The retailers existing alcohol inventory must be separated from any alcohol used during the special event. Must attach letter from the location suspending license for duration of special event*
- Split premise between special event and retail location - *Both the special event licensee and the retailer will conduct sales of alcohol. (These sales will be done in separate areas. If alcohol is donated or purchased by the special event licensee it must be in a separate area than the alcohol that is dispensed by the licensed retailer.)*
- Off Sale only - *Wine/Distilled Spirits Pull, Live or Silent Auctions* - *Retailer will still be permitted to conduct all normal sale and service of alcohol.*

**SECTION 4**

1. Has the applicant been convicted of a felony, or had a liquor license revoked within the last five (5) years?  
 Yes  No If yes, attach letter of explanation.
2. How many special event days have been issued to this organization during the calendar year? 0
3. Is the Organization using the services of a Special Event Contractor? (A licensee can utilize the services of a special event contractor who may purchase and sell alcohol on behalf of the licensee. If no special event contractor is listed, the licensee is responsible for the sales and service of alcohol.)  
 Yes  No If yes, please provide the Name of the Special Event Contractor: \_\_\_\_\_
4. Is the organization using the services of a series 6, 7, 11, or 12 licensee to manage the sale or service of alcohol?  
(Licensees who hold a series 6, 7, 11, or 12 license are automatically qualified to be the special event contractor)  
 Yes  No if yes, please provide the Name of Licensee: \_\_\_\_\_ License #: \_\_\_\_\_
5. List the name of the Individual or Organization that will receive revenues, **MUST EQUAL 100 PERCENT.**

**Attach additional sheet if necessary.**

Name: St Bridget Roman Catholic Parish Percentage: 100%  
Address: 2213 N. Lindsay Road Mesa AZ 85213  
Street City State Zip

Name: \_\_\_\_\_ Percentage: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City State Zip

Please read A.R.S. § 4-203.02 Special event license: rules and R19-1-205 Requirements for a Special Event License.

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

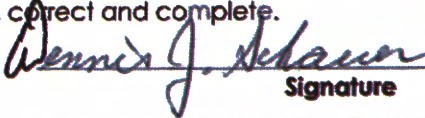
**NO ALCOHOLIC BEVERAGES SHALL LEAVE A SPECIAL EVENT UNLESS THEY ARE IN AUCTION WINE OR DISTILLED SPIRITS PULL SEALED CONTAINERS OR THE SPECIAL EVENT LICENSE IS STACKED WITH WINE /CRAFT DISTILLERY FESTIVAL LICENSE.**

**SECTION 5** License premises diagram. The licensed premises for your special event is the area in which you are authorized to sell, dispense or serve alcoholic beverages under the provisions of your license. Please attach a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.



If the special event will be held at a location without a permanent liquor license or if the event will be on any portion of a location that is not covered by the existing liquor license, this application must be approved by the local governing body before submitting to the Department of Liquor Licenses and Control. Please contact the local governing board for additional information.

**APPLICANT SIGNATURE**

**Declaration:**  
I, (Print Name) Dennis Schauer, declare under penalty of perjury that I am authorized to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.  
  
Signature

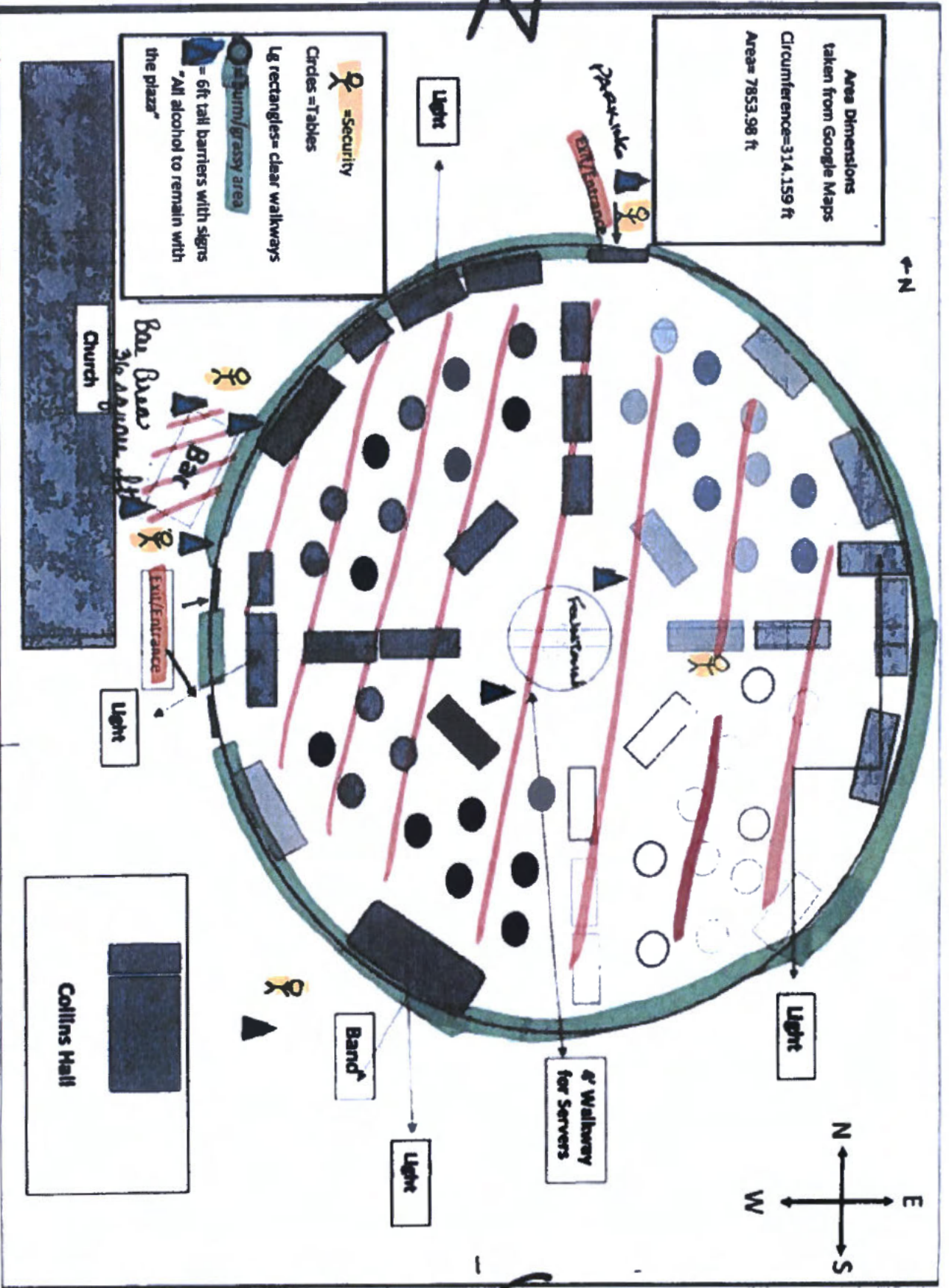
**LOCAL GOVERNING BODY**

Date Received: \_\_\_\_\_  
I, \_\_\_\_\_ recommend  APPROVAL  DISAPPROVAL  
(Government Official) (Title)  
On behalf of \_\_\_\_\_  
(City, Town, County) Signature Date Phone

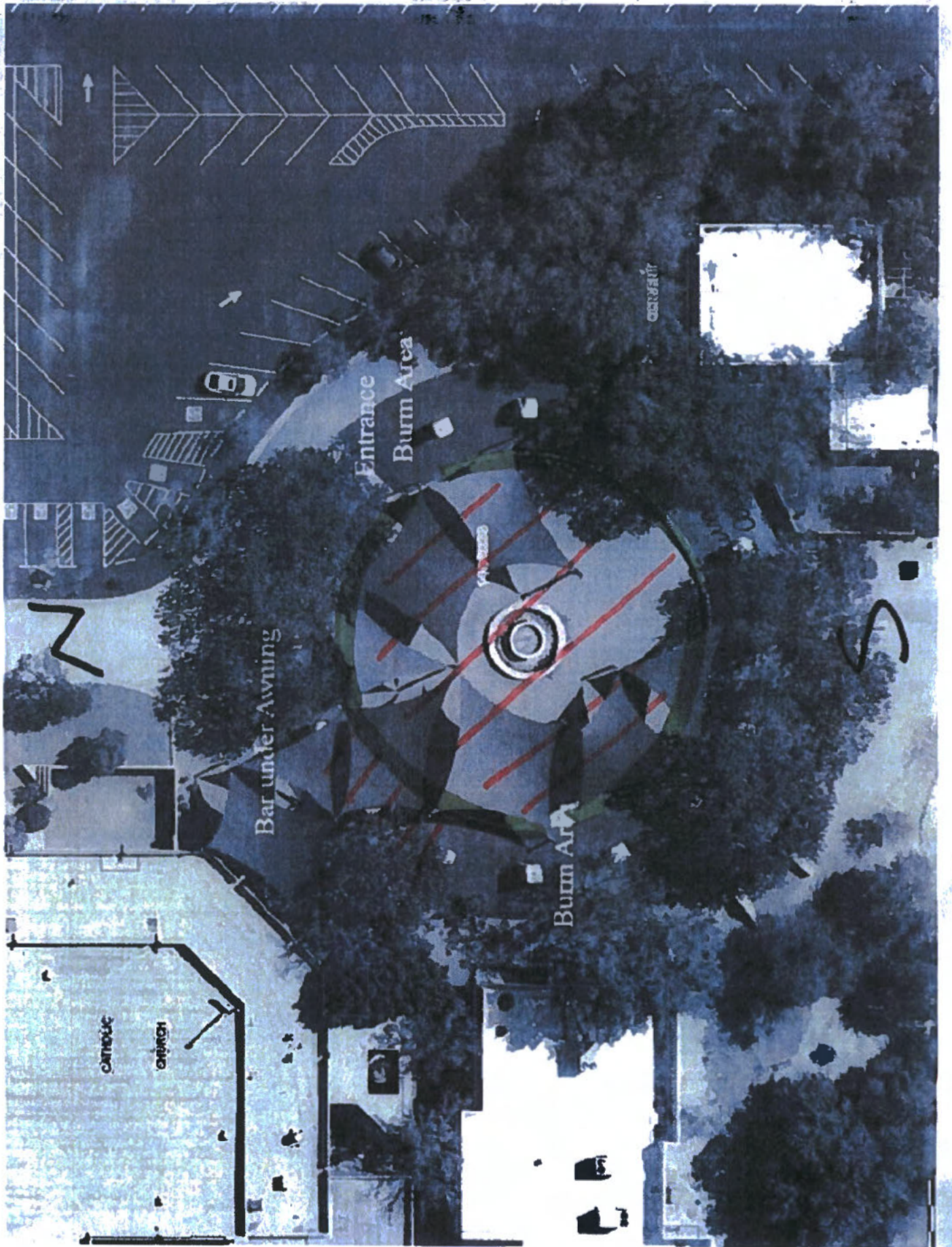
The local governing body (city, town or municipality where the fair/festival will take place) may require additional applications to be completed and submitted. Please check with local government as to how far in advance they require these applications to be submitted. Additional licensing fees may also be required before approval may be granted.

**AZDLLC USE ONLY**

APPROVAL  DISAPPROVAL BY: \_\_\_\_\_ DATE: \_\_\_\_\_



Requested area for where alcoholic beverages would be sold, dispensed, or consumed



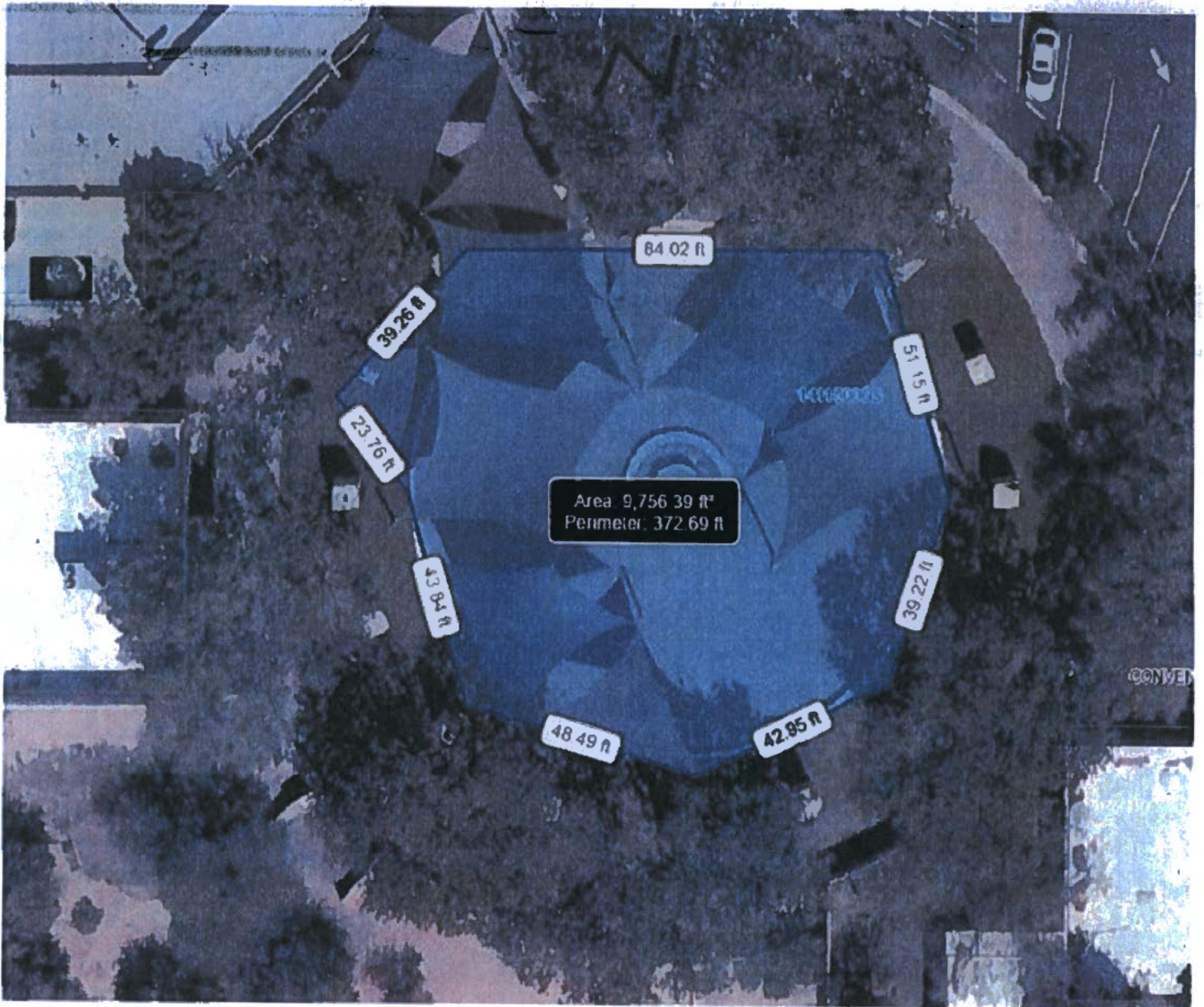
Bar under Awning

Entrance  
Bum Area

Bum Area

CARNIVAL

ENTRANCE



S

**Internal Revenue Service  
P.O. Box 2508  
Cincinnati, OH 45201**

**Department of the Treasury**

**Date: July 12, 2011**

**Person to Contact:**

Roger Meyer

**Toll Free Telephone Number:**

877-829-5500

**Employer Identification Number:**

53-0196617

**Group Exemption Number:**

0928

United States Conference of Catholic  
Bishops  
3211 4<sup>th</sup> Street, NE  
Washington, DC 20017-1194

Dear Sir/Madam:

This responds to your July 1, 2011, request for information regarding the status of your group tax exemption.

Our records indicate that you were issued a determination letter in March 1946, that you are currently exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, and are not a private foundation within the meaning of section 509(a) of the Code because you are described in sections 509(a)(1) and 170(b)(1)(A)(i).

With your request, you provided a copy of the *Official Catholic Directory for 2011*, which includes the names and addresses of the agencies and instrumentalities and the educational, charitable, and religious institutions operated by the Roman Catholic Church in the United States, its territories, and possessions that are subordinate organizations under your group tax exemption. Your request indicated that each subordinate organization is a non-profit organization, that no part of the net earnings thereof inures to the benefit of any individual, and that no substantial part of their activities is for promotion of legislation. You have further represented that none of your subordinate organizations is a private foundation under section 509(a), although all subordinates do not all share the same sub-classification under section 509(a). Based on your representations, the subordinate organizations in the *Official Catholic Directory for 2011* are recognized as exempt under section 501(c)(3) of the Code under GEN 0928.

Donors may deduct contributions to you and your subordinate organizations as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to them or for their use are deductible for federal estate and gifts tax purposes if they meet the applicable provisions of section 2055, 2106, and 2522 of the Code.

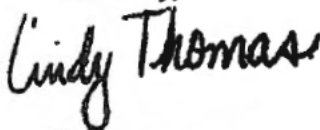
Subordinate organizations under a group exemption do not receive individual exemption letters. Most subordinate organizations are not separately listed in Publication 78 or the EO Business Master File. Donors may verify that a subordinate organization is included

in your group exemption by consulting the *Official Catholic Directory*, the official subordinate listing approved by you, or by contacting you directly. IRS does not verify the inclusion of subordinate organizations under your group exemption. See IRS Publication 4573, *Group Exemption*, for additional information about group exemptions.

Each subordinate organization covered in a group exemption should have its own EIN. Each subordinate organization must use its own EIN, not the EIN of the central organization, in all filings with IRS.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,

A handwritten signature in black ink that reads "Cindy Thomas". The signature is written in a cursive, slightly slanted style.

Cindy Thomas  
Manager, Exempt Organizations  
Determinations

**ENTITY INFORMATION**

Search Date and Time: 11/2/2023 8:55:24 AM

**Entity Details**

ST. BRIDGET ROMAN CATHOLIC PARISH MESA	<b>Entity Name:</b>
14600276	<b>Entity ID:</b>
Domestic Nonprofit Corporation	<b>Entity Type:</b>
Active	<b>Entity Status:</b>
7/1/2008	<b>Formation Date:</b>
In Good Standing	<b>Reason for Status:</b>
7/15/2008	<b>Approval Date:</b>
	<b>Status Date:</b>
7/1/2008	<b>Original Incorporation Date:</b>
Perpetual	<b>Life Period:</b>
Other Services (except Public Administration)	<b>Business Type:</b>
2023	<b>Last Annual Report Filed:</b>
Arizona	<b>Domicile State:</b>
7/1/2024	<b>Annual Report Due Date:</b>
	<b>Years Due:</b>

8/18/2008

**Statutory Agent Information**

**Name:**  
DENNIS M NAUGHTON

**Appointed Status:**  
Active

**Attention:**

**Address:**  
400 E MONROE ST , PHOENIX, AZ 85004, USA

**Agent Last Updated:**  
6/1/2023

**E-mail:**

**Attention:**

**Mailing Address:**

**County:**  
Maricopa

**Principal Information**

Title	Name	Attention	Address	Date of Taking Office	Last Updated
Director	JOHN R MUIR		400 E MONROE ST, PHOENIX, AZ, 85004, Maricopa County, USA	1/1/2023	4/5/2023
Director	JOHN P DOLAN		400 E MONROE ST, PHOENIX, AZ, 85004, Maricopa County, USA	8/2/2022	4/5/2023
Secretary	JOHN ROMERO		1302 E HACKAMORE, MESA, AZ, 85203, Maricopa County, USA	7/1/2015	4/25/2019
Treasurer	GILBERT PRADO		8133 E EVERGREEN ST, MESA, AZ, 85207, Maricopa County, USA	7/1/2018	4/25/2019
President	STEPHEN SCHACK		2213 N LINDSAY ROAD, MESA, AZ, 85213, Maricopa County, USA	9/1/2023	8/21/2023

Address 

Attention:

Address: 2213 N LINDSAY RD, MESA, AZ, 85213, USA

County: Maricopa

Last Updated: 6/1/2023

Entity Principal Office Address

Attention:

Address:

County:

Last Updated:

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