

# 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:

- Free/Host Alcohol  
 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. 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: N/A

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event. This is a private invitation only event where all invitees will be of legal drinking age. Entrance to the event will be monitored and four directors will provide roaming security and control.

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

Wings of Flight Foundation 26-0816787  
 Charity's or Organization's Name 501 (C)#  
Mike Doyle Vice President [REDACTED]  
 Name of Contact at Charity/Organization Title with Organization Phone Number  
Mike Doyle  
 On-Site Agent Responsible for Liquor

How will attendees over the age of 21 be identified? Only invited guests will be allowed in. All invitees are over 21.

At least four (4) directors of the foundation will be in attendance and monitor the event.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? A professional bartending company will perform alcohol service and verify ages in addition to entrance restrictions and event monitors. A professional will monitor + STAFFED BY FOUNDATION ID CHECKS AT DOOR

Will food be served? Yes  No  If yes, what type of food will be served Appetizers, Dinner, Desert

Seating capacity of designated area: # 300

Fundraiser event anticipated # 275 people  
 Donations submitted online or at entrance  
 TS

CSR:
Amount:

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**OCT 05 2022**  
 CITY OF MESA  
 LICENSING OFFICE  
 LLC USE ONLY



## 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

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: Doyle Mike
2. Applicant's mailing address: 

Last	First	Middle
<u>4626 E Fighter Aces Dr</u>	<u>Mesa</u>	<u>AZ 85215</u>
Street	City	State      Zip
3. Applicants home/cell phone: [REDACTED] Applicant's business phone: \_\_\_\_\_
4. Applicant's email address: lazy.captain@gmail.com
5. Name of Non-Profit Organization, Candidate or Political Party/Gov.: Wings of Flight Foundation
6. Non-Profit/IRS Tax Exempt Number: EIN #26-0816787
7. Arizona Corporation Commission File #: 13790711 If out of State please specify: \_\_\_\_\_  
(Attach letter of good standing)
8. Event Location Name: Wings of Flight Foundation
9. Event Address: 4626 E Fighter Aces Drive Mesa AZ 85215 -TS

**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:	<u>12/17/2022</u>	<u>Saturday</u>	<u>7:00 PM</u>	<u>11:59PM</u>
DAY 2:	_____	_____	_____	_____
DAY 3:	_____	_____	_____	_____
DAY 4:	_____	_____	_____	_____
DAY 5:	_____	_____	_____	_____
DAY 6:	_____	_____	_____	_____
DAY 7:	_____	_____	_____	_____
DAY 8:	_____	_____	_____	_____
DAY 9:	_____	_____	_____	_____
DAY 10:	_____	_____	_____	_____

# \* AMENDMENT

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Date 10/27/22 Staff JS

**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 \_\_\_\_\_ Number of Security Personnel \_\_\_\_\_  Fencing  Barriers

Explanation: The event is indoors and is a private invitation only event all invitees will be of drinking age.

Numerous foundation directors and members will be in attendance and monitoring the event for compliance.

**Tickets and id will be checked at the public entrance.**

Will this event be held on a currently licensed premises and within the already approved and licensed area?

Yes  No - If No, Local Governing Body signature is required.

Name of Business \_\_\_\_\_ License Number \_\_\_\_\_ Phone (include Area Code) \_\_\_\_\_

**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)

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.**

5. List the name of the Individual or Organization that will receive revenues, **MUST EQUAL 100 PERCENT**.  
Attach additional sheet if necessary.

Name: Wings Of Flight Foundation Percentage: 100%

Address: 4626 E Fighter Aces Dr Mesa AZ 65215  
Street City State Zip

Name: \_\_\_\_\_ Percentage: \_\_\_\_\_

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

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LICENSING OFFICE

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:** Mike Doyle  
I, (Print Name) Mike Doyle, 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.  
  
Mike Doyle  
Signature

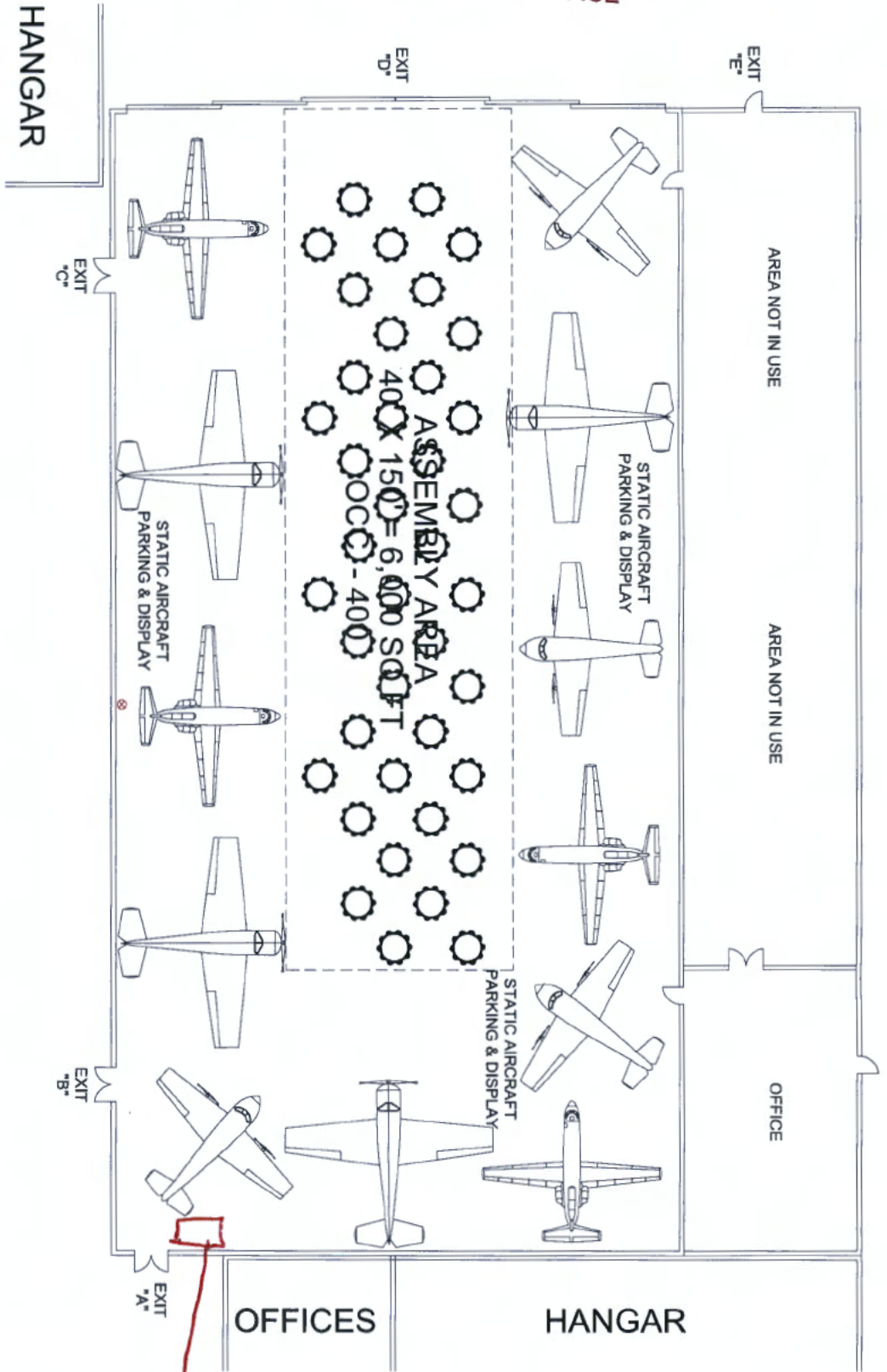
**LOCAL GOVERNING BODY**

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

**AZDLLC USE ONLY**

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

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NOV 23 2022  
CITY OF MESA  
LICENSING OFFICE



WOFF HANGAR - 4626 E Fighter Access Dr

# PLAN "B"

(HANGAR DOOR - PRIMARY EXIT)

Ticket & ID check  
TS

**Tonya Shelstad**

*Provide copy to DLLC \**

**From:** Mike Doyle <lazy.captain@gmail.com>  
**Sent:** Thursday, October 27, 2022 3:10 PM  
**To:** Tonya Shelstad  
**Subject:** Wings of Flight event license

In reference to Wings of Flight Special Event dated 17 Dec2022.

*\** This event will take place on an unlicensed premise with no existing liquor license.

Mike Doyle

Sent from my iPhone

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OCT 27 2022  
CITY OF MESA  
LICENSING OFFICE



INTERNAL REVENUE SERVICE  
P. O. BOX 3508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **JAN 19 2008**

WINGS OF FLIGHT FOUNDATION  
C/O T JAMES LEE  
HEYWOOD & LEE  
1440 S CLEARVIEW AVE STE 101  
MESA, AZ 85209

Employer Identification Number:  
26-0816787  
DIN:  
17053254307007  
Contact Person:  
DONNA BILLOT-MOORE ID# 50304  
Contact Telephone Number:  
(602) 829-5500  
Accounting Period Ending:  
December 31  
Effective Date of Exemption:  
August 27, 2007  
Addendum Applies:  
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Based on the information you submitted with your application, we have determined you are likely to qualify as a private operating foundation described in section 4942(j)(3) of the Code. Accordingly, you are treated as a private operating foundation for your first year. After that, you will be treated as a private operating foundation as long as you continue to meet the requirements of section 4942(j)(3). You are required to file Form 990-PF annually.

Please see enclosed Publication 4221-PF, Compliance Guide for 501(c)(3) Private Foundations, for some helpful information about your responsibilities as an exempt organization.

### ENTITY INFORMATION


Search Date and Time: 10/5/2022 3:22:56 PM

#### Entity Details

 WINGS OF FLIGHT FOUNDATION

13790711

Domestic Nonprofit Corporation

 Active

8/27/2007

 In Good Standing

8/29/2007

6/8/2022

8/27/2007

Perpetual

EDUCATIONAL

2022

Arizona

5/27/2023

Entity Name:

Entity ID:

Entity Type:

Entity Status:

Formation Date:

Reason for Status:

Approval Date:

Status Date:

Original Incorporation Date:

Life Period:

Business Type:

Last Annual Report Filed:

Domicile State:

Annual Report Due Date:

Years Due:

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Original Publish Date:

10/1/2007

**Statutory Agent Information**

Name:

Vasin &amp; Rocco PLLC

Appointed Status:

Active 4/17/2020

Attention:

Mitchell Vasin

Address:

2826 South Carriage Lane, Suite 100, MESA, AZ 85202, USA

Agent Last Updated:

6/8/2022

E-mail:

Attention:

Mitchell Vasin

Mailing Address:

2826 South Carriage Lane, Suite 100, MESA, AZ 85202, USA

County:

Maricopa

**Principal Information**

Title	Name	Attention	Address	Date of Taking Office	Last Updated
Treasurer	BRIAN CHURCHILL		4626 E. Fighter Aces Dr, MESA, AZ, 85215, Maricopa County, USA	8/27/2008	3/30/2020
Director	BEN YORK III		4626 E. Fighter Aces Dr, MESA, AZ, 85215, Maricopa County, USA	5/1/2019	3/30/2020
Director	MICHAEL DOYLE		4626 E. Fighter Aces Dr, MESA, AZ, 85215, Maricopa County, USA	12/8/2018	3/30/2020
Vice-President	MICHAEL DOYLE		4626 E. Fighter Aces Dr, MESA, AZ, 85215, Maricopa County, USA	3/2/2020	3/30/2020

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Title	Name	Attention	Address	Date of Taking Office	Last Updated
Director	ROBERT WILKENING		4626 E. Fighter Aces Dr, MESA, AZ, 85215, Maricopa County, USA	3/30/2020	3/30/2020

Page 2 of 3, records 6 to 10 of 15

**Address** 

**Attention:**

**Address:** 4626 E. Fighter Aces Dr, MESA, AZ, 85215, USA

**County:** Maricopa

**Last Updated:** 6/8/2022

**Entity Principal Office Address**

**Attention:**

**Address:**

**County:**

**Last Updated:**

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