

Pima County Clerk of the Board

Melissa Manriquez

Administration Division 130 W. Congress St., 1st Floor Tucson, AZ 85701 Phone: (520)724-8449 • Fax: (520)222-0448 Management of Information & Records Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

November 14, 2025

Andrea Dahlman Lewkowitz Shake Shack, No. 1709 2600 N. Central Avenue, No. 1775 Phoenix, AZ 85004

RE: Arizona Liquor License Job No.: 363060

d.b.a. Shake Shack, No. 1709

Dear Ms. Lewkowitz:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 12, Restaurant, which was received in our office on October 21, 2025. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, December 2, 2025, at 9:00 a.m. or thereafter, at the following location:

Pima County Administration Building Board of Supervisors Hearing Room 130 W. Congress, 1st Floor Tucson, AZ 85701

Should you have any questions pertaining to this matter, please contact this office at (520)724-8449.

Sincerely,

Melissa Manriquez Clerk of the Board

Enclosure



POSTING

Job#	
	DLLC use only

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

Type or Print with <u>Black</u> Ink

	10/23/25		111	22025
Date o	of Posting:/_	/	Date of Posting Removal:	//_
Applicant's Name:	Shake Shack, N Lewkowitz Last	0. 1709	Andrea First	<u>Dahlman</u> Middle
Business Address:	633 W. Ina Road Street		Tucson city	85704 zip
			notice in a conspicuous place on th d notice was posted for at least twe	
	Monica Torralba	1406	DETECTIVE	(520)351-6000
Pri	int Name of City/County C	Official	Title	Phone Number
	,	Badge Nu	mber	
	— Signed by: Monica Torrall	a		11/12/2025
	381493065FE5401			Date Signed

Return this affidavit with your recommendations or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.



Katrina Martinez Deputy Clerk

Pima County Clerk of the Board

Melissa Manriquez

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TO:	Development Services, Zoning Division
FROM:	Rosy Millan Administrative Specialist I
DATE:	October 22, 2025
RE:	Zoning Report - Application for Liquor License
Attached is	the application of:
d.b.a. Shake 633 W. Ina I Tucson, AZ	85704 uor License Job No. <u>363060</u> Restaurant e <u>X</u> nsfer
ZONING RE	EPORT DATE: 10/22/2025
Will current	zoning regulations permit the issuance of the license at this location?
Yes 🗹	No 🗆
If No, please	explain:
 	
	Pima County Zoning Inspector

When complete, please return to cob mail@pima.gov

15-30-9557

State of Arizona **Department of Liquor Licenses and Control**

Created 10/21/2025 @ 01:08:59 PM

Local Governing Body Report

LICENSE

Number:

Type:

Expiration Date:

012 RESTAURANT

Name:

SHAKE SHACK #1709

State:

Issue Date:

Location:

Pending

Original Issue Date:

633 W INA ROAD

TUCSON, AZ 85704

USA

Mailing Address:

2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)200-7222

Alt. Phone:

Email:

ANDREA@LEWKLAW.COM

AGENT

Name:

ANDREA DAHLMAN LEWKOWITZ

Gender:

Female

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)200-7222

Alt. Phone:

Email:

ANDREA@LEWKLAW.COM

OWNER

60th Day

Name:

SHAKE SHACK ARIZONA LLC

Contact Name:

ANDREA DAHLMAN LEWKOWITZ

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

R20278666

State of Incorporation: DE

Incorporation Date:

08/19/2015

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)200-7222

Alt. Phone:

Email:

ANDREA@LEWKLAW.COM

Officers / Stockholders

Name:

Title:

% Interest:

SHAKE SHACK ENTERPRISES LLC

Member

100.00

SSE HOLDINGS LLC - Stockholder, Member

Name:

SHAKE SHACK INC

Contact Name:

ANDREA LEWKOWITZ

Type:

CORPORATION

AZ CC File Number:

State of Incorporation:

Incorporation Date:

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)200-7222

Alt. Phone:

Email:

ANDREA@LEWKLAW.COM

SHAKE SHACK ARIZONA LLC - Member

Name:

SHAKE SHACK ENTERPRISES LLC

Contact Name:

ANDREA LEWKOWITZ

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number: Incorporation Date:

State of Incorporation:

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone: Alt. Phone: (602)200-7222

ANDREA@LEWKLAW.COM Email:

SHAKE SHACK ENTERPRISES LLC - Member

State of Incorporation:

Name:

SSE HOLDINGS LLC

Contact Name:

ANDREA LEWKOWITZ

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

Incorporation Date:

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)200-7222

Alt. Phone:

Email:

ANDREA@LEWKLAW.COM

SHAKE SHACK INC - COO SSE HOLDINGS LLC - COO SHAKE SHACK ENTERPRISES LLC - COO

Name:

STEPHANIE ANN SENTELL

Gender:

Female

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(646)747-7200

Alt. Phone:

Email:

ALCOHOLLICENSING@SHAKESHACK.COM

SHAKE SHACK INC - CEO SSE HOLDINGS LLC - CEO SHAKE SHACK ENTERPRISES LLC - CEO

Name:

ROBERT MAURICE LYNCH

Gender:

Male

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(646)747-7200

Alt. Phone:

Email:

ALCOHOLLICENSING@SHAKESHACK.COM

MANAGERS

Name:

CARL SIDNEY MCCLURE

Gender:

Male

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(602)516-9452

Alt. Phone:

Email:

CMCCLURE@SHAKESHACK.COM

Page 3 of 5

Name:

MOLLY MACDOUGAL COOPER

Gender:

Female

Correspondence Address: 2600 N CENTRAL AVENUE

#1775

PHOENIX, AZ 85004

USA

Phone:

(480)220-8195

Alt. Phone:

Email:

MCOOPER@SHAKESHACK.COM

APPLICATION INFORMATION

Application Number:

363060

Application Type:

New Application

Created Date:

10/02/2025

QUESTIONS & ANSWERS

012 Restaurant

Are you applying for an Interim Permit (INP)? 1)

Are you one of the following? Please indicate below. 2)

Property Tenant

Subtenant

Property Owner

Property Purchaser

Property Management Company

PROPERTY TENANT

3) Is there a penalty if lease is not fulfilled?

Yes

What is the penalty?

TERMINATION AND/OR OTHER MONETARY PENALTIES

Is the Business located within the incorporated limits of the city or town of which it is located? 4)

If no, in what City, Town, County or Tribal/Indian Community is this business located? PIMA COUNTY

What is the total money borrowed for the business not including the lease? 5)

Please list each amount owed to lenders/individuals.

Are there walk-up or drive-through windows on the premises? 6)

Does the establishment have a patio? 7)

Is the patio contiguous or non-contiguous (within 30 feet)?

CONTIGUOUS

Is your licensed premises now closed due to construction, renovation or redesign or rebuild? 8)

If yes, what is your estimated completion date?

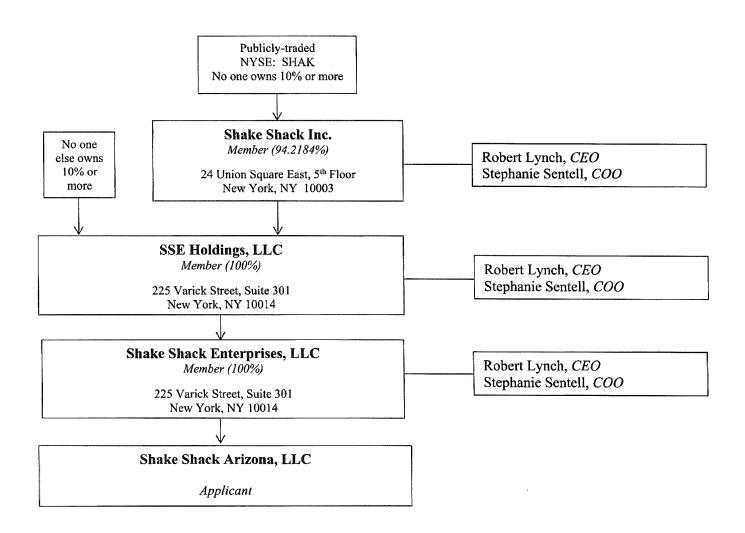
FEBRUARY 2026

9) What type of business will this license be used for? RESTAURANT

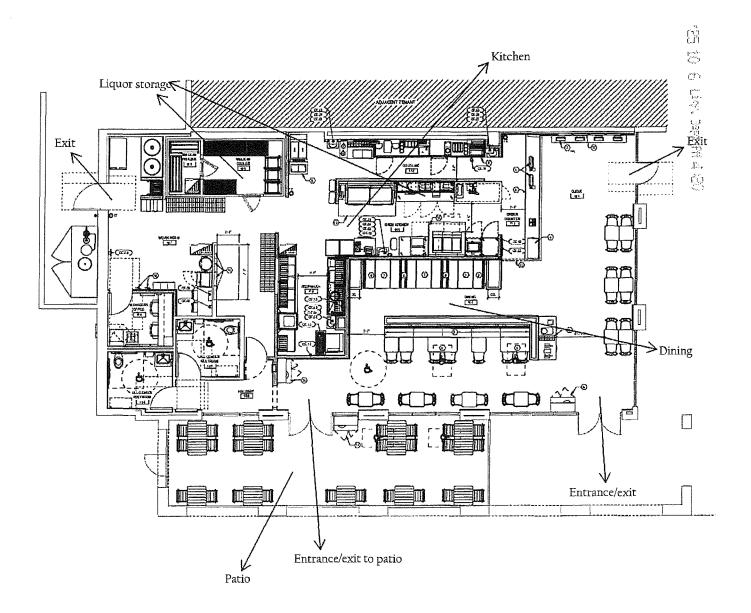
IMA	MR.	NTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
MISCELLANEOUS	1709_AGT ADL (Ctn).pdf	10/02/2025
QUESTIONNAIRE	1709_AGT ADL (Q).pdf	10/02/2025
RECORDS REQUIRED FOR AUDIT	1709_Audit.pdf	10/02/2025
QUESTIONNAIRE	1709_CP Lynch (Q).pdf	10/02/2025
QUESTIONNAIRE	1709_CP Sentell (Q).pdf	10/02/2025
DIAGRAM/FLOOR PLAN	1709_diagram.pdf	10/02/2025
MENU	1709_menu.pdf	10/02/2025
QUESTIONNAIRE	1709_MGR Cooper (Q+T).pdf	10/02/2025
ORGANIZATIONAL DOCUMENTS	1709_Ownership.pdf	10/02/2025
RESTAURANT OPERATION PLAN	1709_ROP.pdf	10/02/2025

Shake Shack Arizona, LLC Ownership Chart | 01/07/2025



SHAKE SHACK #1709 633 W. Ina Road Tucson, AZ 85704 2,971 SF (interior) + 548 SF (patio)





RESTAURANT/HOTEL/MOTEL OPERATION PLAN

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

Type or Print with **Black** Ink

Name of restaurant (Plea	use print): SHAKE SHACK #1709	
	nent below by Make, Model, and Capac	sity:
	LIST ONLY THE FOLLOWING - NO AT	TACHMENTS
Grill	LANG GAS COUNTERTOP GRIDDLE (9K-2	
Oven	NONE	
Freezer	CUSTOM THERMALRITE- SHAKE SHACK	WALK-IN COOLER/FREEZER COMBO
Refrigerator	CUSTOM THERMALRITE- SHAKE SHACK	WALK-IN COOLER/FREEZER COMBO
Sink	3 - EAGLE HAND SINKS (HSA-10-F-2X) 1 - EAGLE HAND SINKS (HSA-10-F-LRS-2X))
Dish Washing Facilities	EAGLE 3 COMPARTMENT SINK (314-18-3-3 1 - ECOLAB DISHWASHER (EHT-V)	0-SLF-TB)
Food Preparation Counter (Dimensions)	EAGLE STAINLESS STEEL TOP WORK TAB	LE (T3030SB-BS)
Other		
3. Attach a copy of your Fl	JLL menu with pricing <u>INCLUDING ALCOI</u>	HOLIC BEVERAGES
4. What percentage of you	or public premises is used primarily for res	taurant dining?
(Do not include kitchen, b	ar, hi-top tables, or game area.) 65	%
5. Does your restaurant hav	re a bar area that is distinct and separa	te from the dining area? TYES 🗓 No
(If yes, what percentage o	of the public floor space does this area co	<u>over?)</u> %
6. List the <u>seating capacity</u>	for:	
a) Restaurant dining	area of your premises:	[46]
(DO NOT INCLUDE b) Bar area	PATIO SEATING)	[+ }
	TOTAL	[= 46]

7. What type of dinnerwo	ıre is primarily used in your re	estaurant?	Reusable	X Disposable	Both
8. Does your restaurant c	ontain any games, televisio i	ns, or any othe	er entertainment?	X YES	☐ No
If yes, specify what type 2-3 TVs	es and how many (examples:	: 4-TV's, 2-Pool 	Tables, 1-Video G	came, etc.)	
	ninment or dancing? YE. W often (example: DJ-2 x a w		-2 x a month, Live	Band-1 x a month,	ලි සි etc.) ූ
					* * * * * * * * * * * * * * * * * * *
10. List number of employ	ees for each position: Position	н	ow many	_	
	Cooks	See	below***		
	Bartenders				
	Hostesses				
	Managers		2		
	Servers	See	below***		
	Other ()		***50 Team Membe	
	Other ()		Cooks, Servers, Bus Cashiers	sers, Expo,
	Other (
with A.R.S. § 4-210(A)(2) a	EA DAHLMAN LEWKOWITZ nd (3) that I have read and u ide herein are true and corre	nderstand the t	foregoing and ver of my knowledge.	perjury and in com fy that the informati	



















EST. 2004 in NYC





\$4.29 Single

\$6.59 Double

Chicken

buttermilk herb mayo

Add bacon +\$1.55

Hamburger*

pickle or onion

100% all-natural cage-free chicken. No hormones and no antibiotics ever. Served on a non-GMO potato bun.

Chick'n Shack Crispy chicken breast with lettuce, pickles,

Let us know if you would like lettuce, tomato,



Flat-Top Dogs

100% all-natural Vienna beef. No hormones and no antibiotics ever. Served on a non-GMO

\$4.25	Shack-cago Dog®	380
	Dragged through the garden with Rick's Pick	s
	Shack relish, onion, cucumber, pickle, tomate	ο,
	sport pepper, celery salt, mustard	

\$3.30	Hot Dog	350
	Add Shack cheese sauce +\$0.50	70
\$4.59	Chicken Doa	320

Shake Shack chicken, apple and sage sausage



心 Crinkle Cut Fries

Yukon potatoes. No artificial ingredients.

\$2.99	Fries	420
\$3.99	Cheese Fries	560



Frozen Custard

Dense, rich, creamy ice cream, spun fresh all day. Our custard base is made from all-natural sugar, never from corn syrup.

ක්	Cal
3hakes	640.930
Hand-spun vanilla, chocolate, salt	ed caramel.

55.29	Hand-spun vanilla, chocolate, salted caramel,
	black & white, strawberry, peanut butter.
	coffee Fair Shake
	Make it malted · \$0 50

Shake of the Week

	leafored costata navor	
\$5.29	Floats	510
	Root beer, purple cow, creamsicle	



Add whipped cream -\$0.50

Vanilla, chocolate, flavor of the week

\$3.59	Single Dip	220-280
\$4.59	Double Dip	450-540
\$5.99	Pints To Go	770-910



620

	rrozen custara bienaea with mix-ins	
4.59	Single	390-543
6 70	Double	780.1000

Shack Attack

Chacolate custard, fudge sauce, chacolate truffle cookie dough and Mast Brothers Shake Shack dark chocolate chunks, topped with chocolate sprinkles

Pratt St. Pie Oh My

Vanilla custard and slice of Dangerously Delicious blueberry pancake pie

Salty Balty

Chocolate and vanilla custard, chocolate truffle cookie dough, cheesecake blondie and sea salt

5% of sales from our Salty Balty concrete support Moveable Feast, providing nutritious meals at no cost to those in need.

Design Your Own Concrete

\$3.59	Single	280-320
\$4,79	Double	560-640
	Miv-Inc	5 220

- \$0.50 Chocolate truffle cookie dough
- Chocolate toffee
 - Strawberry purée
 - Fudge sauce
 - Salted caramel sauce
 - Peanut butter sauce
 - Marshmallow sauce
 - Dark chocolate chunks

Stand For Something Good

\$3.55

60

Drinks

Shack-made Lemonade	<u>Co</u>
Original or featured flavor	
Small	130-155
Large	195-235

Organic Fresh Brewed Iced Tea

	E:Ch. /E:C. YM	
\$2.80	Large	0
\$2.30	Sman	U

	rirry/rirry
	Half lemonade, half organic iced tea
=	Email

	rian ichichade, nan digame icaa ica	
52.55	Small	80
\$3.30	Large	11.5

Fountain Soda

	Coke, Diet Coke, Coke Zero, Sprite,
	Fanta Orange, Fanta Grape, Dr Pepper
20	Small

\$2.80	Large
	Abita Draft Root Beer

52.80	Small
53.55	Large

\$4.75 Stumptown Cold Brew Coffee Brewed with Direct Trade beans

\$1.90 Honest Kids Organic Apple Juice 130

52,40 SHACK OF Bottled Water 1% supports the cleanup of water sources





Cal

歸

Q-270

CF1 180



ShackMeister® Ale

	Brewed exclusively for Shake Shack by	
	Brooklyn Brewery	<u>Ca</u>
\$5.69	Draft, 16oz.	190
\$7.69	Draft, 24oz	28



Wine

Shack Red or White

Made exclusively for Shake Shack by Frog's Leap, Napa Valley, CA White, 60z. Glass

120 \$8.89 Red, 6oz. Glass 125



Treats for those with four feet.

Pooch-ini®

ShackBurger dog biscuit, peanut butter sauce, vanilla custard Not intended for small dogs

Bag O' Bones

5 ShackBurger dog biscuits by Bocce's Bakery



RECORDS REQUIRED FOR AUDIT

RESTAURANT/HOTEL/MOTEL

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

Type or Print with Black Ink

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine Compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

SHAKE SHACK #1709

1. Name of restaurant (Please print):

- 2. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
- 3. A list of all food and liquor vendors
- 4. The restaurant menu used during the audit period
- 5. A price list for alcoholic beverages during the audit period
- 6. Mark-up figures on food and alcoholic products during the audit period
- 7. A recent, accurate inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
- 8. Monthly Inventory Figures beginning and ending figures for food and liquor
- 9. Chart of accounts (copy)
- 10. Financial Statements-Income Statements-Balance Sheets

11. General Ledger

- A. Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes Journal Tapes and Z-tapes
 - 3) Dated Guest Checks
 - 4) Coupons/Specials/Discounts
 - 5) Any other evidence to support income from food and liquor sales
- B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks

12. Tax Records

- A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
- B. Income Tax Return city, state and federal (copies)
- C. Any supporting books, records, schedules or documents used in preparation of tax returns

13. Payroll Records

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages
- 14. Off-site Catering Records (must be complete and separate from restaurant records)
 - A. All documents which support the income derived from the sale of food off the license premises.
 - B. All documents which support purchases made for food to be sold off the licensed premises.
 - C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).

A.R.S. §4-210(A)7

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(G)

For the purpose of this section:

1. "Restaurant" means an establishment which derives at least forty percent (40%) of its gross revenue from the sale of food

2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any under any other license that has been issued for the premises pursuant to this article.

I, (Print Full Name) ANDREA DAHLMAN LEWKOWITZ hereby	swear under penalty of perjury and in compliance
with A.R.S. § 4-210(A)(2) and (3) that I have read and understa	
statements that I have made herein are true and correct to the	e best of my knowledge.

Applicant Signature:

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE

Certificate #816634		☐ On-sale
	Certificate of Completion	☐ Off-sale
	For Figure 1	🛛 On- and off-sale
Title	4 BASIC Liquor Law Training	<u></u>
A Certificate of Completion must be on a form; plapproved training provider and, when issued, the	rovided by the Arizona Department of Uquar. Certifi Certificate is signed by the course participant.	cates are completed by a state-
The State requires BASIC Title 4 training only as a p required to have BASIC Title 4 training are listed at employment.	rerequisite for MANAGEMENT Title 4 training or as a re the base of this Certificate. Licensees sometimes re	esult of a liquor law violation. Persons quire BASIC Title 4 Training a condition of
A replacement Certificate of Completion for Title completion date.	4 training must be available through the training pro	vider for two years after the training
	Student Information	
그 사람들은 그 사람들이 다 얼마를 다 되었다.	COUNTRIES \ 2	
	Molly M Cooper	
	Full Name (please print)	
	1 JOST A	
	Signature	
07-07-2025	07-06-202	
Training Completion	Date Certificate Expirati	on Date
	(lihitee years from com	pletion date)
	Training Provider Information	
Professional	Server Certification Corporatio	n (PSCC)
	Company Name	NP
P.O. Bo	ox 192, Madison, South Dakota 57042	ŗ
	Mailing Address	
	1- (800) 247-7737	ι
	Daytime Contact Phone Number	
I, Robert Graham	, certify that the above named individ	lual did successfully complete
	A.R.S. §4-112(G)(2) and Arizona Administr	ative Code (A.A.C.)R19-1-103

Instructor Name (please print)

Title 4 BASIC Training in accordance with A.R.S. § 4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control.

Lunderstand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

Robert V Grah. 07 / 07 / 2025

Instructor Signature Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below

licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3) Conveyance (series 8) Restaurant (series 12) Government (series 5) Liquor Store (series 9) In-state Farm Winery (series 13) Bar (series 6) Private Club (series 14) Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)

Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

Certificate of Completion Title 4 MANAGEMENT Liquor Law Training

A Certificate of Completion must be on a form provided by the Afizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT, Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Corcompletion date.	npletion for Title 4 training must be a	vailable through the training	provider for two years after the training	ng
	Molly	nformation M Cooper		
	<u> </u>	e (please print)		
		natura)	000	
Train	07-07-2025 ing Completion Date	07-06-2 Gertificate Exc (three years from	iration Date	
		der Information		
Prof	fessional Server Certi	fication Corpora	tion (PSCC)	
	Compo	nny Name		
	P.O. Box 192, Madison, South Dakota 57042			5
	Mailin	g'Address	49 manuser	Const.
	1- (800)	247-7737		OT C.
	Daytime Conta	ct Phone Number		ete S
I, Robert Graha		the above named ind	ividual did successfully compl	ete 🤼
Title 4 MANAGEMENT Trainin (A.A.C.)R19-1-103 using train Licenses and Control. I und	ng in accordance with A.R.S.; ning course content and mat erstand that misuse of this Ce 4 Training Provider named in t	erials approved by the ertificate of Completion	na Administrative Code Arizona Department of Liquo a can result in the revocation of I by A.A.C. R19-1-103(E) and (I	r S
	Fobet V Grah	<u>07 / 07</u> Day Mo	_/2025 	
Persons required to complete BAS	IC & MANAGEMENT Title 4 training: 1	owner(s) actively involved i licensed business of a series licensees, agents and man	n the daily business operations of a lic	
In-state Microbrewery (series 3) Conveyance (series 8) Restaurant (series 12)	Government (series 5) Liquor Store (series 9) In-state Farm Winery (series 13)	Bar (series 6) Private Club (series 14)	Beer & Wine Bar (series 7) Hotel/Motel w/restaurant (series 1 Beer & Wine Store (series 10)	1)
Liquor license applications (initial a submitted to the Department of Lic	nd renewal) are not complete until	alid Certificates of Complet	ion for all required persons have bee	n

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

July 11, 2013