

Pima County Clerk of the Board

Julie Castañeda

Administration Division 130 W. Congress, 5th Floor Tucson, AZ 85701 Phone: (520)724-8449 • Fax: (520)222-0448 Document and Micrographics Mgt. Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

August 25, 2017

Nicholas Carl Guttilla Safeway No. 2809 c/o Gutilla Murphy Anderson 5415 E. High St., No. 200 Phoenix, AZ 85054

RE: Arizona Liquor License No.: 09100146

d.b.a. Safeway No. 2809

Dear Mr. Guttilla:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 9, Liquor Store, which was received in our office on July 28, 2017. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, September 5, 2017, 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,

Julie Castañeda Clerk of the Board

Enclosure



Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934

www.azliquor.gov (602) 542-5141

ALG 25:17m11:01 PC CLK UF BD (A-C.S.

ala la

AFFIDAVIT OF POSTING

Date of Posting: _	8/3/17	Date of Posting Removal	: <u>8/2</u>	4/17
Applicant's Name	Safeway No. 2809 Guttilla	Nicholas First		Carl _{Middle}
Business Address:	13380 E. Mary Ann Clevela	ind Way	Vail City	85641
License #: <u>09100</u>	146			
	at pursuant to A.R.S. 4-201, I posted recover applicant and said notice was			osed to be
TZANK R. HE	int Name of City/County Official	PROCESS SER	1EE 520 PI	310 4034 none Number
	Storpature	775	É	3/24/17

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.



Melissa Manriquez Deputy Clerk

Pima County Clerk of the Board

Julie Castañeda

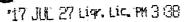
Administration Division 130 W. Congress, 5th Floor Tucson, AZ 85701 Phone: (520) 724-8449 • Fax: (520)222-0448 Document and Micrographics Mgt. Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

TO:	Development Services, Zoning Division
FROM:	Ricci Romero Administrative Support Specialist Senior
DATE:	7/28/2017
RE:	Zoning Report - Application for Liquor License and Sampling Privileges
Attached is	the application of:
	vay No. 2809 ary Ann Cleveland Way
Series <u>9, Lic</u> New Licenso Person Trar	e
ZONING RE	EPORT DATE: 74(7
Will current	zoning regulations permit the issuance of the license at this location?
Yes 🖯	No □
If No, please	e explain:
100 A	

AUG07-174H0851PCCLKUFBD @Q

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

Pima County Zoning Inspector





Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934 www.azliquor.gov (602) 542-5141

DLLC USE ONLY	
License # 09100140	
Date Accepted: 7/21//	7
CSR:	•
——————————————————————————————————————	

Application for Liquor License

	Іур	e or Print with B	lack Ink				
	PLICATION FEE AND INTERIN						
	A service fee of \$25 will be of	charged for all dish					
SECTION 1 Type of Lice Interim Permit New License Person Transfer Location Transfer (s Probate/ Will Assign Seasonal	·	(No Fees)	□J.T.W. □Individ □Partne ☑Corpo □Limite □Club □Gove □Trust □Tribe	R.O.S. dual ership	f Ownership Co		
ECTION 3 Type of license	Add Sampling Priv A.R.S.§4-206.01(G) Add Growler privil A.R.S.§4-207(A) &	, (H), (I) & (L) leges (restaurant,	_				ation)
1.Type of License (restaur	ant, bar etc.): Series 9		2. LICENSE # (if i	issued): 09	9100146		
SECΠON 4 Applicants							
I. Agent's Name:	GUTTILLA		NICHOLAS				1046
2. Applicant/Licensee Na	Last Safeway Inc		First			Middle A	1000
) Annicont/Liconroc	ame. Jaieway, iiio.						
Applicand Licensee No. 2. Applicand Licensee No. 2.	name for tune of ownership check	or rection 1)					1000
(Ownership	name for type of ownership check						•
(Ownership	o name for type of ownership check g Business As-DBA): Safe						1059
Ownership Business Name (Doing	name for type of ownership check	eway #2809	Vail City	AZ State		B I	1059
(Ownership 3. Business Name (Doing 4. Business Location Add (Do not use PO Box)	p name for type of ownership check g Business As-DBA): Safe dress: 13380 E Mary Ann street	eway #2809 Cleveland Way	City	State	85641 zip Code 5054	B	1059
(Ownership 3. Business Name (Doing 4. Business Location Add (Do not use PO Box)	o name for type of ownership check g Business As-DBA): Safe dress: 13380 E Mary Ann street Guttilla Murphy Anderson	eway #2809 Cleveland Way	City	State	Zip Code	B I	1059
(Ownership 3. Business Name (Doing 4. Business Location Add (Do not use PO Box) 5. Mailing Address: C/O G (All correspondence will be ma	p name for type of ownership check g Business As-DBA): Safe dress: 13380 E Mary Ann street Guttilla Murphy Anderson siled to this address) Street	eway #2809 Cleveland Way 5415 E High St	city #200 Phoeni	State ix, AZ &	Zip Code 5054 Zip Code	B I	1059
(Ownership Business Name (Doing Business Location Add (Do not use PO Box) Mailing Address: C/O G (All correspondence will be ma Business Phone: Pendi	p name for type of ownership check g Business As-DBA): Safe dress: 13380 E Mary Ann street Guttilla Murphy Anderson sited to this address) Street ing	eway #2809 Cleveland Way 5415 E High St	city #200 Phoeni city	State ix, AZ &	Zip Code 5054 Zip Code	B I	1059
(Ownership 3. Business Name (Doing 4. Business Location Add (Do not use PO Box) 5. Mailing Address: c/o G (All correspondence will be ma 6. Business Phone: pendi 7. Email Address: psiness 8. Is the Business located	p name for type of ownership check g Business As-DBA): Safe dress: 13380 E Mary Ann street Guttilla Murphy Anderson sited to this address) Street ing	cleveland Way 5415 E High Sta Daytime d limits of the ab	city #200 Phoeni city e Contact Phone:	State ix, AZ 8: State (480) 304	zip Code 5054 zip Code -8300	Pima Coun	1059
(Ownership 3. Business Name (Doing 4. Business Location Add (Do not use PO Box) 5. Mailing Address: c/o G (All correspondence will be ma 6. Business Phone: pendi 7. Email Address: psiness B. Is the Business located	g name for type of ownership checking Business As-DBA): Safe dress: 13380 E Mary Ann Street Guttilla Murphy Anderson siled to this address) Street ing Gegamlaw.com	cleveland Way 5415 E High Sta Daytime d limits of the ab	city #200 Phoeni city e Contact Phone: Dove city or town? Community is this b	State ix, AZ 8: State (480) 304	zip Code 5054 zip Code -8300	Pima Coun	1059

□No

□Yes

Is Arizona Statement of Citizenship & Alien Status for State Benefits complete?

SECTION 5 Background Check	**						
EACH PERSON LISTED MUST SUB 1. If the applicant is an entity, n					322. PROCESSING	FEE PER CARD.	
a) Date Incorporated/Organized: 7/23/86				State where Incorporated/Organized: Delaware			
b) AZ Corporation or AZ I	L.C. File No	s: F00372050	Date a	uthorized to do b	usiness in AZ 11/	13/86	
2. List any individual or entity the owned by another entity, attaneeded to disclose any control or more of the license.	ch an orga	nizational chart	showing th	ne ownership struc	cture. Attach ad	ditional sheets as	
Last First	Middle	Title	%Owned	Mailing Address	City	State Zip	
See attached flow chart	•						
	a. a						
		(Attach addition	ial sheet if ne	cessary)		A	
SECTION 6 Interim Permit If you intend to operate busine For approval of an interim perm • There must be a valid lice • A Hotel/Motel license is t	nit: ense of the	same series issue	ed to the cu	rrent location you	are applying for		
1. Enter license number curre	ntly at the l	ocation:			_/_		
2. Is the license currently in us	e? 🔲 Yes 🗀]No If no, h	ow long ha	s it been out of ys	e?		
I, (Signature)CONTROLLING PERSON on the	e stated lice	ense and locatio	on.	declare that I am	the CURRENT O	WNER, AGENT, OR	
Attach a c	opy of the	license currentl	y issued at	this location to thi	s application.		
		<u>U</u>	OTARY				
State of Arizona)						
County of)					į	
On thisDay of	10	hoforo me	n porronally	apposted			
Day Mo		rear		appeared	(Print Name of Docum		
Whose identity was provento acknowledged that he or she	me on the t signed the a	pasis of satisfacto above/attached	ory evidenc d documen	e to be the persor t.	n who he or she c	claims to be and	
				Signatur	e of NOTARY PUBLIC		
(Affix Seal Above)							
SECTION 7 Probate, Receiver, EACH PERSON LISTED MUST SUE		_					
 Current Licensee's Name:) Last			First		Middle	
2.Assignee's Name:	· · · · · · · · · · · · · · · · · · ·						
License Number:	Last	· .		First		Middle	
ATTACH A COPY O	F THE DOCUM	MENT THAT SPECIF	ICALLY ASSI	GNS THE LIQUOR LIC	CENSE TO THE ASSI	GNEE.	

Safeway Inc.

AB Acquisition LLC (B) (12/6/05 DE)

OFFICERS: Robert Miller: Exec. Chairman Robert Dimond: CFO Robert Gordon: EVP/GC/Sec

"CLASS B MEMBERS" (Safeway ONLY)

Safeway Group Holdings Inc. (94.29% parent entity for AB Acquisition LLC "Class B" members only)

Robert Miller: Executive Chairman Robert Gordon: EVP/Sec/GC Robert Dimond: EVP/CFO

<u>Cerberus Iceberg, LLC</u> (39.22%) (Stephen Felnberg, Director reported on CP Affidavit) Cerberus Partners, LP (52.46%)

GP: Cerberus Associates, L.L.C.
Cerberus Institutional Partners V, LP (31.73%)
GP: Cerberus Institutional Associates II L.L.C. (No other member owns 10% or greater of licensee Safeway Inc.)

<u>Jubliee ABS Holding, LLC</u> (15.11%) (Jay Schottenstein, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

Klaff Markets Holdings, LLC (15.11%) (Hersch Klaff, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

<u>Lubert-Adler SAN Aggregator, L.P.</u> (15.11%) (Dean Adler, Director reported on CP Affidavit)
General Partner(s): Lubert-Adler Group SAN LLC
(No limited partner owns 10% or greater of licensee Safeway Inc.)

KRS AB Acquisition, LLC - 15.11% (David Henry, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

(No other member owns 10% or greater of CLASS B interest in AB Acquisition LLC)

Albertsons Companies LLC (B) (Delaware LLC) (100% Member: AB Acquisition LLC (B))

OFFICERS:

Robert Miller -- Chairman Robert Gordon - EVP/Sec/GC Robert Dimond: CFO/EVP Robert Larson – SVP/CAO Bradley Fox – VP/Treas/Asst Sec

Safeway Inc (LICENSEE)

Acc #f-0037205-0 (Delaware Corp) (100% Shareholder: Albertsons Companies LLC (B))

OFFICERS:

Robert Miller - Chariman/CEO Robert Gordon - EVP/SEC/GC Bradley Fox - VP/Treas Robert Dimond - EVP/CFO

SECTION 8 Government (for Cities, Towns or Counties only)					
1. Government Entity:					
2. Person/Designee:					
Last First Middle Daytime Contact Phone #					
A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.					
SECTION 9 Person to Person – Current Licensee Information ARS§4-203(C), (D), (G) (Bar and Liquor Stores only – Series 06, 07 and 09)					
1. License #:					
2. Current Agent Name:					
·····					
3. Current Licensee Name:					
4. Current Business Name:					
5. Current Daytime Phone: Primary Email Address:					
s. current baytine Phone Frilliary Email Address					
6. Does current licensee intend to operate the business while this application is pending? Yes No					
7. I authorize the transfer of this license to the applicant. Signature or Agent or Individual controlling person					
<u>NOTARY</u>					
State of Arizona					
County of}					
On thisDay of, 20 before me personally appeared(Print Name of Document Signer)					
Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.					
Signature of NOTARY PUBLIC (Affix Seal Above)					

SECTION 10 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S.§4-207. (A) and (B) state that no <u>retailer's license</u> shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S.§4-205.02) Series 12
- b) Hotel/motel license (A.R.S.§4-205.01) Series 11
- c) Microbrewery (A.R.S.§4-205.08) Series 3
- d) Craft Distillery (A.R.S.§4-205.10) Series 18

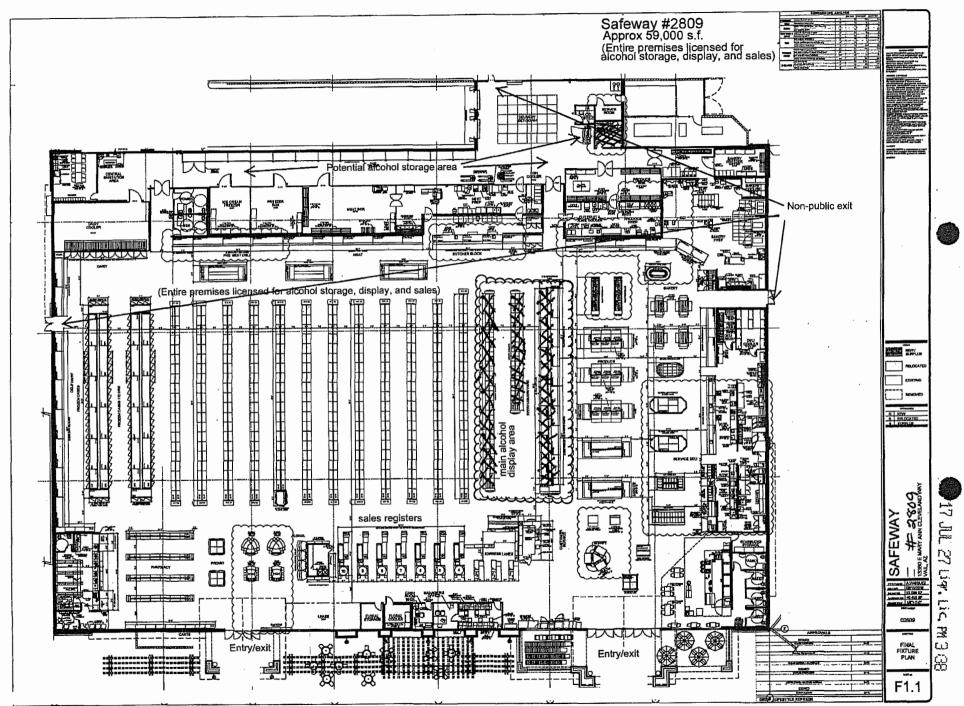
- e) Government license (A.R.S.§4-205.03) Series 5
- f) Playing area of a golf course (A.R.S.§4-207 (B)(5))
- g) Wholesaler/Distributor Series 4
- h) Farm Winery Series 13
- I) Producer Series 1

-Section 10 continued -

1. Distance to nearest School: 355 feet		_Name of School: ${}^{ extstyle{C}}$	ld Vail Midd	le School		
(If less than one (1) mile note footage)		Address: 13299 E	Colossal Cav	e Rd - Vai	l, AZ 85641	
2. Distance to nearest Church: 1,269 feet		Name of Church:				
(If less than one (1) mile note footage)		Address: 13260 E Colossal Cave Rd - Vail, AZ 85641				
SECTION 11 Business Financials A.R.S.§4-202(1) 1. I am the:	F)					
☐ Tenant: a person who holds the lease of a pr☐ Sub-tenant: a person who holds a lease whi☐ Owner☐ Purchaser☐ Management Company	• •	nother person (tenan	i) for all or part	t of a prope	erty.	
2: If the premises is leased give lessors:	Name: n/a					
	Address:	Street				
	n/a		City	State	Zip	
3. What is the penalty if the lease is not fulfille		or Oth	er:			
4. Total money borrowed for the Business not	including lease?	\$ 0				
Please List Lenders/People you owe money t	o for business.					
Last First Middle	Amount Owed	Mailing Address	City	State	Zip	
n/a						
	<u> </u>					
	(Attach additional shee	et if necessary)				
5. Has a license or a transfer license for the p	remises on this ap	plication been der	ied by the sta	ate within tl	ne past year?	
☐ Yes ☑ No If yes	, attach explanati	on.				
6. Does any spirituous liquor manufacture, who	olesaler, or employ	yee have an interest	in your busine	ss?		
☐ Yes ✓ No If yes	s, attach explanat	ion.				
SECTION 12 Diagram of Premises Check ALL boxes that apply to your business Walk-up or drive-through windows			·			
Patio: Contiguous	П	Non-Contiguous v	vithin 30 feet			
Q	to construction	7				
1. Is your licensed premises now closed due		`	an or rebuild∠ 7 2018			
Yes . No If yes, what is your estimate	∍d completion da	_{te?} <u>02</u> <u>/</u> 01	/			
Please attach a diagram of the premises wh consumed, dispensed, possessed or stored.						

North. 2/24/2017

floor, stage, game room and the kitchen. **DO NOT INCLUDE** parking lots, living quarters or areas where business is not conducted under this liquor license. When completing your premises diagram, please identify which orientation is



-Section 12 continued on next page-

2. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

3. As stated in A.R.S.§4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.

opticants initials

RESTAURANTS AND HOTELS/MOTELS ONLY

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. The fee of \$50.00 will be due and payable upon submitting this application.)

- 4a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture, these are required as part of the diagram. A.R.S.§4-205.02(C)
- 4b. Provide a restaurant operation plan.

1, (Signature) Nicholas Carl Guttilla by declare that I am the Owner/Agent filing this application, I have read this document and verify the content and all statements are true, correct and complete, to the best of my knowledge.

		NOI

State of Arizona

County of _ Maricopa

On this 26 Day of 26

, 20 /> Vear before me personally appeared Nicholas Carl Guttilla

(Print Name of Document Signer)

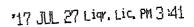
Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

OFFICIAL SEAL KAREN PLUM Notary Public State of Arizona MARICOPA COUNTY (Affix Seal Above) Expires July 13, 2020

Signature of NOTARY PUBLIC

A.R.S.§41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

- B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.
- E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.
 - F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.





Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934 www.azliquor.gov (602) 542-5141

DITC RISE ONTA	
Issuance fee: \$100.00 PAID 7/27	/17
Issuance Date:	
Liquor Store (series 9)	
☐ Beer and Wine Store (series 10)	
CSR:	

SAMPLING PRIVILEGES APPLICATION SERIES 9 OR 10

		AS CARL GUT		e#: 09100	
Business Name: Saf	eway #2809				
Business Location: $\frac{1}{}$	3380 E Mary Ann Cle		Vail AZ		85641
Mailing Address: c/o	et Address Guttilla Murphy Anderson et Address or P.O. Box	5415 E High St #	State	County AZ Marico County	Zip Code pa 85054 Zip Code
Business Phone Numb	_{per:} pending	Daytime Cont	act Number: (480	0) 304-8300	-
Email Address: psin	es@gamlaw.com		•		
Premises is 5,0 At least 75% o	y business qualifies as a 000 square feet or larger of shelf space is dedicated to be				
A.R.S. §4-206.01(J) Ba	r, Beer and Wine Bar or Liquor Sto	ore licenses; number p	ermitted; fee; san	ıpling privileg	es
(Signature), Nichol	7/1-/10/6	attest that I a			
	esponsibility for compliance with				
_	have made on this document to e and the annual \$75 renewal (complete. I under	rstand that I a	m responsible to
ule vioo boadiree ie	C ancenic annual 4/0 (chevan	foo for these sampling	nrivilenes Samni	lina privilege i	•
due at the same time	e as the renewal for the "current				•
	e as the renewal for the "current				•
due at the same time LOCAL GOVERNING	e as the renewal for the "current				•
LOCAL GOVERNING	e as the renewal for the "current			oplication,	renewal fees are
LOCAL GOVERNING	e as the renewal for the "current	license #" identified c	n page 1 of this ap	PROVAL D	renewal fees are
LOCAL GOVERNING	e as the renewal for the "current BOARD ment Official Signature)	license #" identified c	n page 1 of this ap	PROVAL D	renewal fees are
I,(Government on behalf of DLLC USE ONLY	e as the renewal for the "current BOARD ment Official Signature)	license #" identified c	n page 1 of this ap recommend □AP Phone	PROVAL D	renewal fees ard



Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934 www.azliquor.gov (602) 542-5141

APPLICANT/CONTROLLING PERSON AFFIDAVIT

TO BE COMPLETED BY THE ORGANIZATION'S PRESIDENT.

IF THIS IS A CLUB, PARTNERSHIP, OR OTHER TYPE OFORGANIZATION, A SIGNATURE OF EQUAL LEVEL IS REQUIRED.

Organization:					
Affidavit of: Nicholas Carl Guttilla					
Position/Title: Agent and attorney for applicant					
State of:	Arizona	AZ Corp./L.L.C. #:	F00372050		
County of:	Maricopa	State Incorporated:	Delaware		
The undersigned,	Nicholas Carl Guttilla		Being first sworn under oath declares:		
			·		

- In connection with this organization's application to obtain a liquor license for our operation(s) in Arizona, have complete d and delivered to the Arizona Department of Liquor Licenses and Control the required questionnaire and fingerprint card
- 2. The required questionnaires and fingerprint cards of all officers, directors, regional managers, managing members, partners, etc., who direct or are involved in the direction of the management of the policies involving spirituous liquor in the State of Arizona; and all stockholders who own ten percent (10%) or more of the corporation or limited liability company have also been completed and delivered to the Arizona Department of Liquor Licenses and Control.

Name and title of such individuals are as follows (or list attached):

- Robert Miller Chairman
 Robert Gordon Exec VP/Secretary
 Bradley Fox Exec VP
 Robert Dimond Exec VP
- 5) Robert Larson Sr. VP for parent entity

3. There are, in addition to those submitting questionnaires and fingerprint cards, other officers, limited liability members, and/or board members of this organization who are not submitting such information to the Arizona Department of Liquor Licenses and Control. None of these individuals directs or is involved in the direction of the management of policies of this organization involving spirituous liquor in the State of Arizona.

Such members and positions, along with date and place of birth, are as follows (or list attached): Stephen Feinberg, Director of parent entity (already on file for this licensee)

Hersch Klaff, Director of parent entity (already on file for this licensee)

3) Jay Schottenstein, Director of parent entity (already on file for this licensee)

Dean Adler, Director of parent entity (already on file for this licensee)

4. None of the individuals listed under item #3 possesses the power to vote ten percent (10%) of the outstanding voting securities of this organization, nor can any of them control the election of one or more of the Board of Directors or managing members of the organization.

5. Finally, on information and belief, none of the individuals listed under item #3 have at any time been convicted of a felony, had a liquor license revoked, or violated any provisions of a liquor license issued to that member.

DATED this Day day of Month Year

Nicholas Carl Guttil	la ့	declare that I a	am the APPLICANT	filing this notification.
I have read this document a				_
X (Signature)				
OFFICIAL SEAL	State	Arizona	County of _	Maricopa
KAREN PLUM Notary Public State of Arizona MARICOPA COUNTY My Comm. Experes July 13, 2020		the foregoing in	strument was acknowle	
My Commission Expires on: 7/13/20			(Signature of Notary Public	



DEPARTMENT OF LIQUOR LICENSES AND CONTROL -ALCOHOLIC BEVERAGE LICENSE License 09100146

Issue Date: 6/7/2017

Issued To:

NICHOLAS CARL GUTTILLA, Agent SAFEWAY INC, Owner

Location:

SAFEWAY #2060 1767 E PRINCE RD TUCSON, AZ 85719 Expiration Date: 10/31/2017

Mailing Address:

NICHOLAS CARL GUTTILLA SAFEWAY INC SAFEWAY #2060 5415 E HIGH ST #200 C/O GUTTILLA MURPHY ANDERSON PHOENIX, AZ 85054

