



# Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez  
Deputy Clerk

Administration Division  
130 W. Congress, 5<sup>th</sup> 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

August 21, 2018

Michael Ormond Kelly  
Famous Sams  
2305 W. Ruthrauff Road, No. B-11  
Tucson, AZ 85705

RE: Arizona Liquor License No.: 06100231  
d.b.a. Famous Sams

Dear Mr. Kelly:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 6, Bar, which was received in our office on July 18, 2018. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, September 4, 2018, 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

For your information, enclosed is a copy of the Zoning Inspector's Report. Any questions pertaining to the enclosed Report should be directed to Tom Drzazgowski at 724-9522. If you have any questions pertaining to the above referenced hearing, please contact this office at 724-8449.

Sincerely,

A handwritten signature in black ink, appearing to read "Julie Castañeda".

Julie Castañeda  
Clerk of the Board

Enclosure

c: Tom Drzazgowski, Development Services Zoning Inspector



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

AUG 21 10 11 49 POC/KCF/RO  
ARS

**AFFIDAVIT OF POSTING**

Date of Posting: 7/24/18 @ 1300

Date of Posting Removal: 8/20/18

Applicant's Name: Famous Sams

Business Address: 1970 W. River Road, No. 160-190 Tucson 85704

License #: 06100231

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

DET. DESCHENES DETECTIVE (520) 940-5671

[Signature] 8/21/18

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.



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Management of Information & Records Division  
1640 East Benson Highway  
Tucson, Arizona 85714  
Phone: (520) 351-8454 • Fax: (520) 791-6666

TO: Development Services, Zoning Division  
FROM: Alina Bárcenas *ARB*  
Administrative Support Specialist Senior  
DATE: 7/19/2018  
RE: Zoning Report - Application for Liquor License

Attached is the application of:

Michael Ormond Kelly  
d.b.a. Famous Sams  
1970 W. River Road, No. 160-190  
Tucson, AZ 85704

Arizona Liquor License No. 06100231  
Series 6, Bar  
New License  
Person Transfer  
Location Transfer

ZONING REPORT

DATE: 7/30/18

Will current zoning regulations permit the issuance of the license at this location?

Yes

No

If No, please explain:

*Bar use not allowed in  
specific plan. Staff could support Series 12 -  
Restaurant*

Pima County Zoning Inspector

When complete, please return to [cob\\_mail@pima.gov](mailto:cob_mail@pima.gov)

JUL 30 18 PM 03:05 PCLKOFBD

*ARB*

18-14-9328

\*18 JUL 12 Lic. Lic. PM 3 26



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

DLIC USE ONLY

License # 25044
Date Accepted: 7-12-18
CSR: SG

Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- Interim Permit
New License
Person Transfer (series 6, 7 and 9)
[X] Location Transfer (series 6, 7 and 9)
Probate/ Will Assignment/ Divorce Decree (No Fees)
Seasonal

SECTION 2 Type of Ownership

- J.T.W.R.O.S.
Individual
Partnership
Corporation
[X] Limited Liability Co
Club
Government
Trust
Tribal
Other (Explain)

SECTION 3 Type of Privilege

- Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)
Add Growler privileges (restaurant, series 12, license only, 300-foot restriction applies)

1. Type of License (Series of license): # 6 - Bar 2. LICENSE # 06100231

SECTION 4 Applicants

- Agent's Name: HALL MICHAEL ORMOND
Individual/Owner Name: ENTERPRISE 54, LLC
Business Name (Doing Business As-DBA): FAMOUS SAMS
Business Location Address: 1970 W. RIVER RD. #160-190 TULSON AZ 85704 Pima
Mailing Address: 2305 W. RUTHRAUFF RD. #B-11 TULSON AZ 85705
Business Phone: (520) 292-0492 Daytime Contact Phone: (520) 907-9407
Email Address: FSAMS3@COMCAST.NET
Is the Business located within the incorporated limits of the above city or town? No
Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only) \$ w/a

Table with columns: Fees, Department Use Only, Application, Interim Permit, Site Inspection, Finger Prints, Total of All Fees. Values: 100.00, 44.00, 144.00

JUL 18 10:43 AM '18 ARS

**SECTION 5 Interim Permit**

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. §4-203.01. For approval of an Interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. §4-203.01 (A)

1. Enter license number currently at the location: \_\_\_\_\_

2. Is the license currently in use?  Yes  No If no, how long has it been out of use? \_\_\_\_\_

**NOTARY**

I (Print Full Name) \_\_\_\_\_ hereby declare that I am the Agent, Current Owner, or Controlling Person on the stated license and location.

Signature: \_\_\_\_\_ State of \_\_\_\_\_ County of \_\_\_\_\_  
The foregoing instrument was acknowledged before me this \_\_\_\_\_ Day of \_\_\_\_\_ Year

My Commission Expires on: \_\_\_\_\_ Date

\_\_\_\_\_  
Signature of Notary

**SECTION 6 Background Check**

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. If the applicant is an entity, and not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 03/27/2008 State where Incorporated/Organized: Arizona

b) AZ Corporation or AZ L.L.C. File No: L-14382550 Date authorized to do business in AZ: 03/27/2008

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed. Disclose all controlling persons and members, shareholders or general partners who own a beneficial interest of 10% or more of the applicant or licensee.

Last	First	Middle	Title	% Owned	Mailing Address	City	State	Zip
DAVE	MICHAEL	ORMOND	owner/man	100	2305 W. FUTHRAUFF RD.		AZ	85705

(Attach additional sheet if necessary)

**SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license A.R.S. §4-204**

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. Current Licensee's Name: \_\_\_\_\_  
(Exactly as it appears on the license) Last First Middle

2. Assignee's Name: \_\_\_\_\_  
Last First Middle

3. License Number: \_\_\_\_\_

**ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.**

**SECTION 8 Government (for Cities, Towns or Counties only)**

1. Government Entity: \_\_\_\_\_

2. Person/Designee: \_\_\_\_\_  
Last First Middle Daytime Contact Phone #

**SECTION 9 Person to Person Transfer ARS§4-203(C), (D), (G)  
(Bar and Liquor Stores only – Series 06, 07, and 09)**

1. License #: \_\_\_\_\_

2. Individual Owner/Agent Name: \_\_\_\_\_  
Last First Middle

3. Ownership Name: \_\_\_\_\_  
(Exactly as it appears on the license)

4. Current Business Name: \_\_\_\_\_  
(Exactly as it appears on the license)

5. Business Location Address: \_\_\_\_\_  
Street City State County Zip

6. Current Daytime Phone: \_\_\_\_\_ Primary Email Address: \_\_\_\_\_

7. Does current licensee intend to operate the business while this application is pending?  Yes  No

8. I, (Signature); \_\_\_\_\_ authorize the transfer of this license to the applicant.

**NOTARY**

I (Print Full Name) \_\_\_\_\_ hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.

Signature: \_\_\_\_\_ State of \_\_\_\_\_ County of \_\_\_\_\_  
The foregoing instrument was acknowledged before me this \_\_\_\_\_

My Commission Expires on: \_\_\_\_\_ Date \_\_\_\_\_ Day of \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

**SECTION 10 Location Transfer– Current Licensee Information ARS§4-203(C), (D), (G)  
(Bar and Liquor Stores only – Series 06, 07, and 09)**

1. Current Business: Name: Famous Sam's #3

Address: 2400 W. RUTHERAUFF RD. TULSON, AZ 85705  
(exactly as it appears on license)

2. New Business: Name: Famous Sam's

Address: 1970 W. RIVER RD. #160-190 TULSON, AZ 85704

**SECTION 11 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 **retailer's license** 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 03
- d) Craft Distillery (A.R.S. §4-205.10) Series 18
- e) Government license (A.R.S. §4-205.03) Series 05
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 04
- h) Farm Winery Series 13
- i) Producer Series 01

1. Distance to nearest School: 2,192 Ft.  
(If less than one (1) mile, note footage)

Name of School: SUNMAN SUEWIZ Academy  
Address: 2325 W. SUNSET RD. TULSON, AZ 85741

2. Distance to nearest Church: 1,242 Ft.  
(If less than one (1) mile, note footage)

Name of Church: DAVIDE REAR  
Address: 1925 W. RIVER RD. TULSON, AZ 85704

**SECTION 12 Business Financials A.R.S. §4-202(F)**

1. I am the:

- Tenant: a person who holds the lease of a property; a lessee.
- Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
- Owner
- Purchaser
- Management Company

2. If the premises is leased give lessors:

Name: LA CHOLLA { RIVER ROAD ASSOCIATES, LLC  
Address: 6925 E. INDIAN SCHOOL RD. SLOTTSALE, AZ 85251  
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ \$10,688<sup>80</sup> - or Other: LATE (CON) LOCKOUT (SERV. DEP.)

4. Total money borrowed for the Business, not including lease? \$ 150,000 -

Please List Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip
ARIZONA NATIONAL BANK			\$150,000 -	5740 N. LA CHOLLA	TULSON	AZ	85741

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?

Yes  No If yes, attach explanation.

6. Does any spirituous liquor manufacturer, wholesaler, or employee have an interest in your business?

Yes  No If yes, attach explanation.

**SECTION 13 Diagram of Premises**

Check ALL boxes that apply to your business:

Walk-up or drive-through windows

Patio: Contiguous

Patio: Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

Yes  No If yes, what is your estimated completion date? 10/01/2018

2. What type of business will this license be used for? (be Specific) Bar/RESTAURANT

3. Please attach a diagram of the premises which clearly shows only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and kitchen.

**DO NOT INCLUDE**

Parking lots, living quarters or areas where business is not conducted under this liquor license. Please identify which orientation is North on the diagram.

4. 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.

**ATTACH DIAGRAM**

**IMPORTANT NOTE:** As stated in A.R.S. §4-207.01 (B), it is the licensee's 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.

**RESTAURANTS AND HOTELS/MOTELS ONLY**

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

5a. 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)

5b. Provide a restaurant operation plan.



**SECTION 14 SIGNATURE BLOCK**


**NOTARY**

I (Print Full Name) Michael Raymond Hall hereby declare that I am the Individual Agent, Owner,  
Or Controlling Person on the stated license and location.

Signature: [Signature] State of Arizona County of Pima

The foregoing instrument was acknowledged before me this  
4<sup>th</sup> Day of June 2018

My Commission Expires on: 06/05/2021 Date

 OFFICIAL SEAL  
**KEVIN A. KRAMBER**  
Notary Public - State of Arizona  
PIMA COUNTY  
My Comm. Expires June 5, 2021

[Signature]  
Signature of Notary

**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.

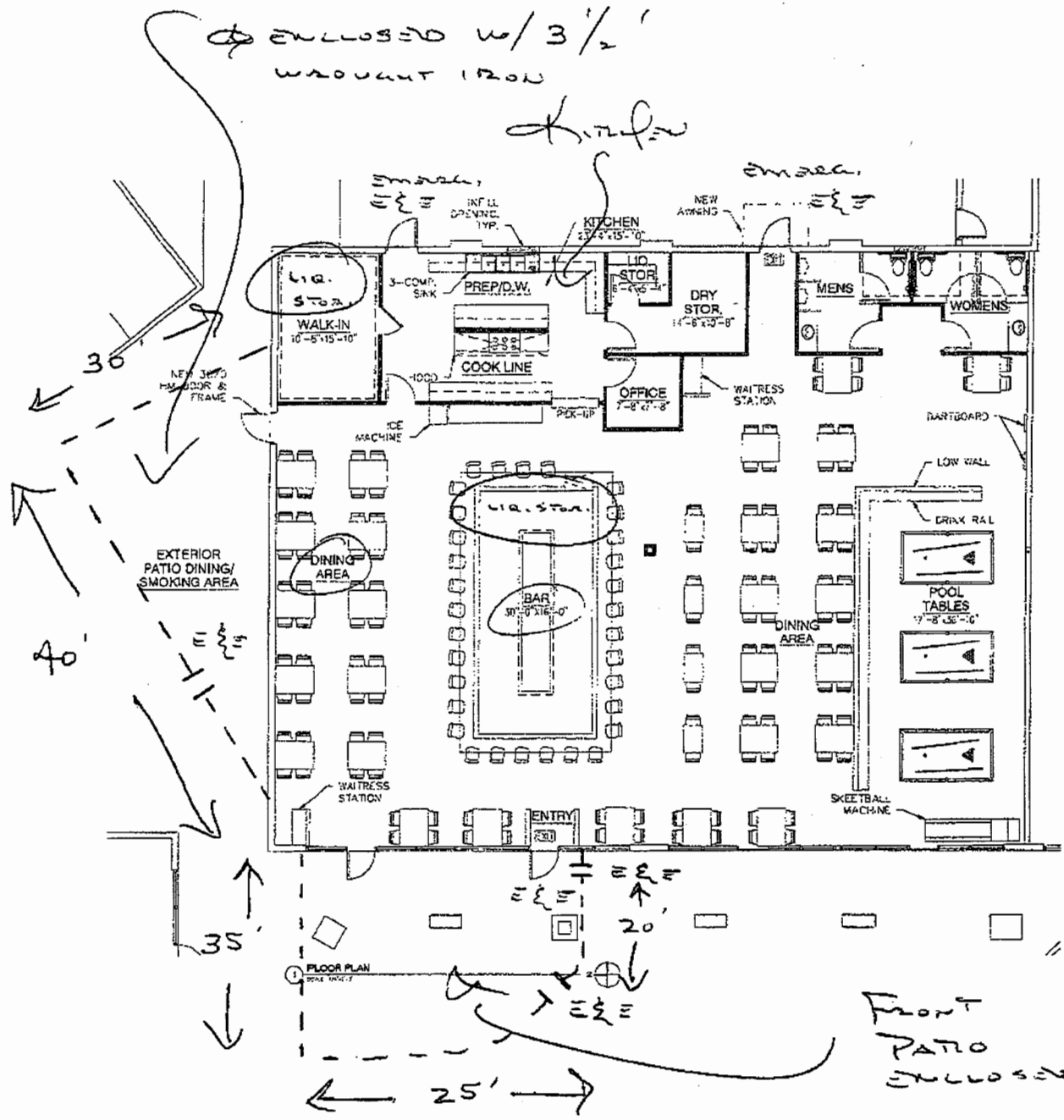
F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.

*Patio Seating*

*ENCLOSED w/ 3 1/2' WROUGHT IRON*

*Kitchen*

*5.1 ft  
SR. FT.*



13201 E. COMMERCE ST.  
DENVER, CO 80231  
PHONE: 625-434-9340

Total Improvement for  
**Famous Sam's Restaurant**  
Pine Glaring Shopping Center  
87 West Pearl  
Denver, Colorado 80202

Floor Plan  
Scheme 2.0

**A1**

*Front PATIO ENCLOSED w/ 3 1/2' WROUGHT IRON*

Certificate # 2785637

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

Certificate of Completion  
For  
Title 4 BASIC Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.  
The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed on the back of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.  
A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Shandra Kelly**

Full Name (please print)

*Shandra Kelly*

Signature

12/11/2015

12/11/2018

Training Completion Date

Certificate Expiration Date  
(Three years from completion date)

Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

77 East Columbus, Suite 102, Phoenix, Arizona 85012

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

**Bill Weigle**

I, \_\_\_\_\_, certify that the above named individual did successfully complete

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. I understand 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).

*Bill Weigle*

Instructor Signature

\_\_\_\_ / \_\_\_\_ / 2015  
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  
2) 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) | Government (series 5)            | Bar (series 6)           | Beer & Wine Bar (series 7)           |
| Conveyance (series 8)            | Liquor Store (series 9)          | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12)           | In-state Farm Winery (series 13) |                          | 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 questionaire (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

18 JUL 12 11:49 AM '13

10879989

Certificate of Completion  
For  
Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona 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 Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Shandra Kelly**

Full Name (please print)

*Shandra Kelly*

Signature

09/14/2017

09/14/2020

Training Completion Date

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, Jesus Altamirano certify that the above named individual did successfully complete  
Instructor Name (please print)  
Title 4 MANAGEMENT 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. I understand 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).

*Jesus Altamirano*

Instructor Signature

11 / 12 / 2015  
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  
2) 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)

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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

18 JUL 12 09:41 PM '13

10891806

Certificate of Completion  
For  
Title 4 BASIC Liquor Law Training

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

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

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Michael Kelly**

Full Name (please print)

*Michael Kelly*

Signature

09/15/2017

09/15/2020

Training Completion Date

Certificate Expiration Date  
(Three years from completion date)

Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, Jesus Altamirano, certify that the above named individual did successfully complete  
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.)R19-1-108 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand 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(F) and (F).

*Jesus Altamirano*

Instructor Signature

15 9 2017  
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  
2) 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) | Government (series 5)            | Bar (series 4)           | Beer & Wine Bar (series 7)           |
| Conveyance (series 8)            | Liquor Store (series 9)          | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12)           | In-state Farm Winery (series 13) |                          | 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.

18 JUL 12 11:41 AM '13

10891807

Certificate of Completion  
For  
Title 4 MANAGEMENT Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona 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 Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Michael Kelly**

(Full Name, please print)

*[Signature]* *[Signature]*  
Signature

09/17/2017

09/17/2020

Training Completion Date

Certificate Expiration Date  
(Three years from completion date)

Training Provider Information

**ABC – Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, Jesus Altamirano certify that the above named individual did successfully complete

Instructor Name (please print)

Title 4 MANAGEMENT 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. I understand 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).

*[Signature]*  
Instructor Signature

15 / 9 / 2017  
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  
2) licensee(s), agent(s) and manager(s) actively involved in the daily business operations of a liquor licensed business of a series listed below

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

18 JUL 12 11:41 AM '13

June 1, 2018

Arizona Department of Liquor Licenses and Control  
800 West Washington  
5<sup>th</sup> Floor  
Phoenix, Arizona 85007

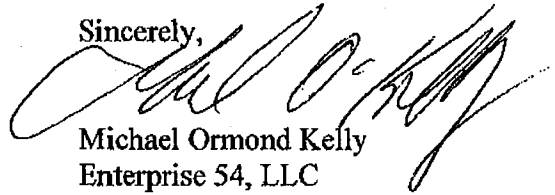
Re: "Famous Sam's #3", 2480 West Ruthrauff Road, Tucson, AZ 85705  
Pima County #06100231 Location-To-Location Transfer

To Whom It May Concern:

This letter is to inform the Department of the attached application for my Series #6 liquor license for the aforementioned business location and my request the Department begin the processing of the application and continue to allow me to operate the business at my current location, 2480 West Ruthrauff Road, until the new location on River Road is fully remodeled and the license is ready to be officially transferred to it.

Please feel free to contact me with any additional questions or comments that may arise.  
Thank you for your time and consideration in this matter.

Sincerely,



Michael Ormond Kelly  
Enterprise 54, LLC  
Manager/Member