CSR:	
Amount:	



SPECIAL EVENT LICENSE APPLICATION FEE \$25.00 PER DAY

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

	DLLC USE ONLY
Job #:	
Date Ac	cepted:
CSR:	
License	#:

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

<u>SECTION 1</u> 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: Province Community Association	/ Trujillo, M	ichelle Brittany		
	(Must be an Officer/Member of the Non Profit Entity) Last	First		Middle	
2.	Applicant's mailing address: 20942 N. Province Parkway M	Maricopa, AZ 8	5138		
	Street	Clty		State	Zip
3.	Applicants home/cell phone: 520-450-2140	_ Applicant's b	ousiness phone: <u>520</u> -	<u>-568-8316</u>	
4.	Applicant's email address: mtrujillo@ccmcnet.com	n			
5.	Special Event Name: Thirsty Thirdsday				
6.	Name of Non-Profit Organization, Candidate or Political Pa	rty/Gov.: F.O.	R. Maricopa		
	Non-Profit/IRS Tax Exempt Number: 26-0527262				
8.	Arizona Corporation Commission File #: 1102636	7If out of S	itate please specif	: y: (Attach letter of	good standing
9.	Event Location Name: Province			Ç ili doli lollol ol	
10	. Event Address: 20942 N. Province Parkway M	aricopa, Az	Z 85138		

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:	Sept. 19, 2024	Thursday	3:30 p.m.	6:30 p.m.
DAY 2:			1.	-
DAY 3:	-		(<u>1</u>	·
DAY 4:	·			
DAY 5:	<u> </u>			8
DAY 6:				9
DAY 7:				
DAY 8:				
DAY 9:			-	3
DAY10:			-	s ************************************

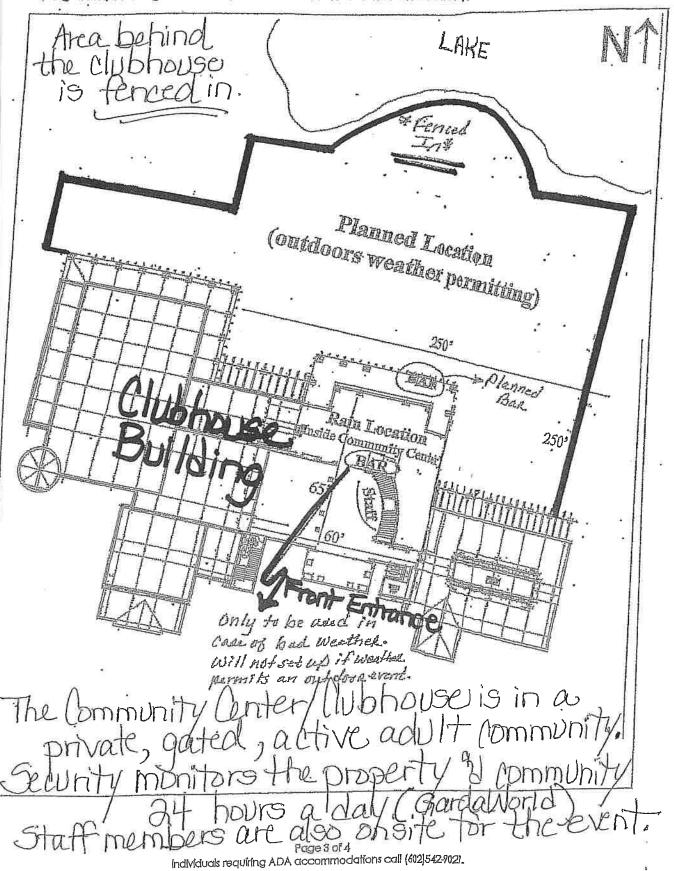
(List type and number	rity and control m r of police/security p e	easures will you take to preve ersonnel and type of fencing or cor	ent violation atrol barriers, i	s of liquor law f applicable.)	s at this event?
Number of Po	olice <u>2</u>	Number of Security Perso	onnel	Fencing	∠ Barriers
Must explain security measures:	The event takes p	lace at the clubhouse of the pr	ivate, gated	community of	Province.
Management and security	will be on-site.	Our gatehouse team prov	rides 24-h	our security	
SECTION 3 What is the purpose	of this event?				
On-site consumption	☐Off-site (d	auction/wine/distilled spirits pu	ıll)	□Bot	h
How is this special event going to Check one of the following boxe		ensing, serving, and selling of s	pirituous liqu	ors?	
A) Special Event being held of Body on page 3. (If check			and signatur	re by the Loca	l Governing
B) Will this event be held on a (Must attach a letter from		d premises and within the alrectises with an explanation of the			:d area?
Name of	Business	License Num	ber	Phone (incl	ude Area Code)
Place license in non-use - Spec Must attach letter from the loc				nt	
Dispense and serve all spirituo revenue from alcohol sales is de		tailer's license – Business operat	es normally,	minimum of 25	% of gross
Dispense and serve all spirituor purchased or donated by the spused during the special event. A	oecial event license	e. The retailers existing alcohol ir	nventory mu	st be separated	d from any alcoh
Split premise between special sales of alcohol. (These sales will it must be in a separate area tha	be done in separa	te areas. If alcohol is donated o	r purchased		
Off Sale only - Wine/Distilled S service of alcohol.	pirits Pull, Live or Sil	lent Auctions – Retailer will still b	e permitted	to conduct all	normal sale and
SECTION 4					
1. Has the applicant been conv	victed of a felony,	or had a liquor license revok	ed within th	ne last five (5) y	/ears?
☐ Yes ✓ No If yes, attach lette	er of explanation.				
2. How many special event day	⁄s have been issuε	ed to this organization during t	the calendo	ar year?	3, Same in 2024
3. Is the Organization using the contractor who may purchase responsible for the sales and sen	and sell alcohol on	cial Event Contractor? (A licer behalf of the licensee. If no spe	nsee can util ecial event d	ize the services contractor is list	of a special eve ed, the licensee
✓ Yes ☐ No If yes, please pro-	vide the Name of	the Special Event Contracto	or: Couple of	Bartenders, Liq	uid Caterers
4. Is the organization using the s (Licensees who hold a series o					
☐ Yes ✓ No if yes, please pro	vide the Name of	Licensee:	Lice	nse #:	
5. List the name of the Individuc	al or Organization	that will receive revenues, M l	JST EQUAL 1	00 PERCENT.	

2/6/2023

Attach additional sheet if necessary.

Name: F.O.R. Maricopa		Percentage: 25%	
Address: P.O. Box 82 Maricopa, AZ 851	39	-	_
Street Name: Liquid Caterers	City	state Percentage: 75%	Zlp
	or A7 85048	Percentage: 1070	
Address: 3145 E. Chandler Blvd. Chandle	City	State	Zip
Please read A.R.S. § 4-203.02 Special event li	icense: rules and R19-	1-205 Requirements for a	Special Event License
ALL ALCOHOLIC BEVERAGE SALI			
NO ALCOHOLIC BEVERAGES SHALL LEAVE A SPE SEALED CONTAINERS OR THE SPECIAL EVENT			
SECTION 5 License premises diagram. The licenthorized to sell, dispense or serve alcoholic be of your special event licensed premises. Please measures and security position.	everages under the pr	ovisions of your license. P	ease attach a diagram
ATTAC	CH DIAC	GRAM	
Declaration: I, (Print Name) Michelle Brittany Trujillo authorized to submit this application. I have re believe all statements made on this application	ead the contents of thi	s application, and to the	of perjury that I am eest of my knowledge
OCAL GOVERNING BODY			
Date Received:			
(Government Official)	(Tifle)	recommend	VAL 🗖 DISAPPROVAL
On behalf of, (City, Town, County)	Signature	Date	Phone
he local governing body (city, town or munic pplications to be completed and submitted. Ple nese applications to be submitted. Additional lice	ase check with local g	overnment as to how far i	advance they require
□approval □ disapproval by:		DATE:	

EECTION 12 License premises diagram. The licensed premises for your special event is the diagram. The licensed premises for your special event is to sell, dispense or serve alcoholic beverages under the povisions of your license. The following space is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.



STATE OF ARIZONA

DEPARTMENT OF LIQUOR LICENSES AND CONTROL

ALCOHOLIC BEVERAGE LICENSE

License LC070009

Issue Date: 10/25/2017

Issued To:

Kinsey Kendrick

Mailing Address:

Couple of Bartenders, Liquid Caterers

3145 E Chandler Blvd, 110-532

Phoenix AZ 85048



6/29/2024

Attn: To Arizona Department of Liquor Licenses and Control

This letter confirms that we F.O.R. Maricopa have given CCMC (Province) approval to use our the Liquor licenses on the following dates:

Sept 19, 2024 Oct 17,2024 Nov 21, 2024 Dec 19, 2024

F.O.R. Maricopa food bank is located at 19428 N. Maricopa Rd., Maricopa, AZ 85139. Please call if you have any questions regarding this letter.

Thank you

Wendy Webb

Executive Director

F.O.R. Maricopa Food Bank

Stay Connected F.O.R. Maricopa Food Bank Information:

Phone:

520-251-0226

Here years ()

Web Site:

http://formaricopa.org/

Facebook:

facebook.com/FOR-Maricopa-152203448904