



Staff Report

Agenda Item: **LIQUOR LICENSE AGENT CHANGE AND ACQUISITION OF CONTROL FOR MAIN STREET CAFÉ & PIZZERIA –**
Discussion and consideration of a recommendation to the Arizona Department of Liquor License and Control for approval of a liquor license application Agent Change and Acquisition of Control from Main Street Café & Pizzeria located at 920 Main Street in Clarkdale.

Staff Contact: Walt Good, Deputy Town Clerk

Meeting Date: October 13, 2009

Background: Scott Buckley is the applicant for a liquor license agent change and acquisition of control for Main Street Café & Pizzeria located at 920 Main Street in Clarkdale, Arizona and has applied to the Arizona Department of Liquor Licenses & Control (ADLLC) for a liquor license change.

Main Street Café & Pizzeria located at 920 Main Street in Clarkdale has been posted with required notification to the public that the Town of Clarkdale Council will review this request in accordance with ADLLC requirements.

Council's consideration of this license change is based upon the following portion of the Approval Process:

The appropriate governing body will hold a meeting and must either approve, disapprove or offer a "no-recommendation" decision on the application. This action must take place within sixty (60) days of the filing of the application. During the time the governing body is processing the application, the Department will conduct a background check of the applicant.

If the application is approved at the appropriate government level and no written protests have been received by the Department, and if there is no objection by the Director, the application will be approved. This process normally takes sixty-five (65) to one hundred five (105) days after the filing of the application.

If the governing body disapproves the application or offers a “no-recommendation”, or if protests have been filed with the Department, the application must be set for a hearing before the State Liquor Board.

Recommendations: To recommend to the Arizona Department of Liquor License and Control, approval of a liquor license Agent Change and Acquisition of Control application from Main Street Café & Pizzeria located at 920 Main Street in Clarkdale.

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934

www.azliquor.gov

(602) 542-5141

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

Check
Appropriate
Box

Agent Change
Complete Sections 1,2,3,4,6
(See Note 1 on back)

Acquisition of Control
Complete Sections 1,2, (3,4 if changing Agent), 6

Restructure
Complete Sections 1,2,(3,4 if changing Agent) ,5,6
(See Note 2 on back)

SECTION 1 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name (INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER)

Buckley, Scott H <i>Howard</i>	P1057646		12133410
Last	First	Middle	Liquor License #
2. Corporation L.L.C. N/A: Main Street Cafe & Pizzeria LLC *B1039928* Corp. File #: L-1423656-0
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: Main Street Cafe & Pizzeria LLC *B1039928*
4. Business Address: 920 Main Street (Do not use P.O. Box Number) Clarkdale Yavapai 86324
(Exactly as it appears on license) City COUNTY Zip
5. Is the business located within the incorporated limits of the above city or town? Yes No
6. Mailing Address: PO Box 272 Clarkdale Arizona 86324
City State Zip
7. Business Phone: (928) 649-3070 Residence Phone: (928) 649-1821
8. Does this transaction involve the sale of any portion of the corporate stock? YES NO N/A If yes, submit a certified copy of minutes.
9. Has there been any change of officers? YES NO N/A If yes, submit a certified copy of minutes.

SECTION 2 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each person listed in Section II must submit a personal questionnaire (Form LIC0101) and a Department approved fingerprint card which may be obtained at the Dept. A person appearing in both lists need only submit one questionnaire and fingerprint card.

1. List individual owner or partners or all directors, officers in corp., members in LLC:

Last	First	Middle	Title	Residence Address	City State Zip
Buckley	Scott	H	<i>owner</i>	863 Tiablanca Road	Clarkdale, AZ 86324

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

2. List stockholders or controlling members owning 10% or more of Corp/LLC:

Last	First	Middle	% Owned	Residence Address	City State Zip
Buckley	Scott	H	100%	863 Tiablanca Road	Clarkdale, AZ 86324

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

Date Received <u>9/15/09</u>
CSR <u>JW.</u>

SECTION 3

(COMPLETE THIS SECTION FOR AGENT CHANGE)

09 SEP 11 11:49:19 PM '09

1. If the corporation/L.L.C. is owned by another entity, ATTACH AN OWNERSHIP AND DIRECTOR / OFFICER / MEMBER DISCLOSURE for the parent entity. Attach additional sheets as necessary in order to disclose real people.

As an Agent, will you be physically present and operating the licensed premises? [X] YES [] NO

If you answered YES, you must provide proof of attendance of a Department approved Liquor Law Training Course within the last five years before your application for Agent can be submitted. If "no" a manager with approved training must be submitted.

SECTION 4

(COMPLETE THIS SECTION FOR AGENT CHANGE)

To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License Number: 12133410 Date of last renewal: September 9, 2008

2. Current Licensee or Agent: Serrano Sophia Samantha Abigal (Exactly as it appears on license) Last First Middle

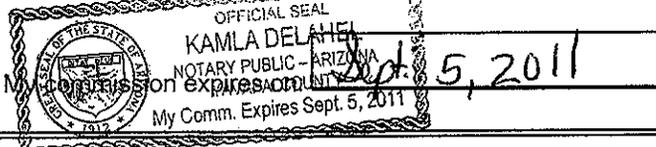
I, Scott Howard Buckley, hereby consent to the agent appointment named herein and agree to immediately assign a new agent in the event of the death, resignation, or discharge of this agent.

I also understand that if the background report shows that I, the corporation, or any officer, director, member, or stockholder have been convicted of a felony in the past five (5) years, I will immediately surrender the license to the Arizona Department of Liquor Licenses and Control and hereby waive all rights to appeal such action.

State of Arizona County of Yavapai

X [Signature] (Signature of INDIVIDUAL/CORPORATE/CLUB OFFICER/MEMBER)

The foregoing instrument was acknowledged before me this 9th day of September, 2009



[Signature] (Signature of NOTARY PUBLIC)

SECTION 5

(COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved? [] YES [] NO If yes, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

- [] J.T.W.R.O.S. [] INDIVIDUAL [] PARTNERSHIP [] CORPORATION [] LIMITED LIABILITY CO. [] TRUST [] OTHER Explain

Type of new ownership:

- [] J.T.W.R.O.S. [] INDIVIDUAL [] PARTNERSHIP [] CORPORATION [] LIMITED LIABILITY CO. [] TRUST [] OTHER Explain

SECTION 6

(COMPLETE THIS SECTION FOR AGENT CHANGE OR ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by INDIVIDUAL OR EXISTING AGENT (if no agent change) OR NEW AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER as listed in Question 1 Section 4

I, Scott Howard Buckley, declare that I am the APPLICANT filing this application.

have read the application and the contents and all statements are true, correct and complete.

X [Signature] (Signature of INDIVIDUAL OR AGENT)

State of ARIZONA County of YAVAPAI

The foregoing instrument was acknowledged before me this 31st day of AUGUST, 2009

My commission expires on: DEC. 27, 2011

[Signature] (Signature of NOTARY PUBLIC)

NOTE 1: The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H)

NOTE 2: The \$100.00 fee for restructure MUST be submitted with this application (A.R.S. 4-209.A)

09 SEP 11 11:49:19 PM '09

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

QUESTIONNAIRE

Attention all Local Governing Bodies: Social Security and Birthdate information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.

Read carefully. This instrument is a sworn document. Type or print with BLACK INK. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT, OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT DLLC. FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY DLLC. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE.

Effective 10/01/07 there is a \$24.00 processing fee for each fingerprint card submitted.

Liquor License #

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

12133410

(If the location is currently licensed)

1. Check appropriate box → Controlling Person (Complete Questions 1-19) Agent (Complete Questions 1-19) Manager (Only) (Complete All Questions except # 14, 14a & 21)
 Controlling Person or Agent must complete #21 for a Manager. Controlling Person or Agent must complete # 21

2. Name: Buckley Scott Howard Date of Birth: [REDACTED]
 Last First Middle (NOT a Public Record)

3. Social Security Number: [REDACTED] Drivers License #: [REDACTED] State: Arizona
 (NOT a public record) (NOT a public record)

4. Place of Birth: Stanford California USA Height: 6' Weight: 185 Eyes: Br Hair: Br
 City State Country (not county)

5. Marital Status Single Married Divorced Widowed Daytime Contact Phone: [REDACTED]

6. Name of Current or Most Recent Spouse: Goudreau, Gianna L Date of Birth: [REDACTED]
 (List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Arizona If Arizona, date of residency: August 1993

8. Telephone number to contact you during business hours for any questions regarding this document. 928-649-3070

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Main Street Cafe & Pizzeria Premises Phone: 928-649-3070

11. Physical Location of Licensed Premises Address: 920 Main Street Clarkdale Yavapai 86324
 Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
01/08	CURRENT	Owner	Main Street Cafe & Pizzeria, 920 Main Street, Clarkdale, AZ 86324
02/06	01/08	Tour Company	Pink Jeep Tours, 204 North Highway 89, Sedona AZ 86336
07/05	02/06	Hotel	Radisson Woodlands Hotel, 1175 W Route 66, Flagstaff, AZ 86001

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↓

See attached

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	Residential Street Address	City	State	Zip
06/07	CURRENT	Own	863 Tiablanca Road	Clarkdale	AZ	86324
01/07	06/07	Own	5955 North Mountaineer Road	Flagstaff	AZ	86004
07/02	01/07	Own	7595 Cave View Road	Flagstaff	AZ	86004

*09 SEP 11 Liq. Dept PM 3 19

Additional Employment

*09 SEP 1 Liq. Dept PM 1 17

09/04 ~ 07/05

University Dining

Sodexo ~ NAU Dining Services

PO Box 4103, Flagstaff, AZ 86011-4103

02/04 ~ 09/04

Beverage Distributor

Pepsi Cola Bottling of Flagstaff

4980 East Railhead Avenue, Flagstaff, AZ 86004

If you checked the Manager box on the front of this form skip to # 15

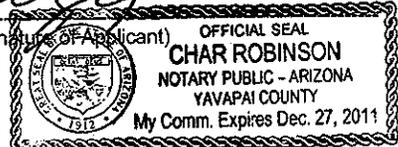
14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, how many hrs/day 2-12 and answer #14a below? If NO, skip to #15. YES NO
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof)
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license. YES NO
15. Have you been convicted, fined, ordered to deposit bail, imprisoned, placed on probation or parole, had to post bond or had sentence suspended for any violation of ANY law or ordinance within the past ten (10) years (include only traffic violations that were alcohol and/or drug related)? YES NO
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? YES NO
17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state? YES NO
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? YES NO
19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state? YES NO

If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement. Give complete details including dates, agencies involved, and dispositions.
SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED

20. I, Scott Howard Buckley, hereby declare that I am the APPLICANT/REPRESENTATIVE
(print full name of Applicant)
filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

x Scott H Buckley
(Signature of Applicant)

My commission expires on: 12 27 2011
Day Month Year



State of ARIZONA County of YAVAPAI

The foregoing instrument was acknowledged before me this 31ST day of AUGUST, 2009
Month Year

Char Robinson
(Signature of NOTARY PUBLIC)

COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license. The manager named must be at least 21 years of age.

State of _____ County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, _____
Month Year

X _____
Signature of Controlling Person or Agent (circle one)

Print Name

My commission expires on: _____
Day Month Year

(Signature of NOTARY PUBLIC)

AZ CORPORATION COMMISSION
FILED



SEP 15 2008

ARTICLES OF AMENDMENT
Pursuant to A.R.S. 29-833 (F)

FILE NO. L-14236560

1. The name of the limited liability company is:

Main Street Cafe & Pizzeria LLC

2. Attached hereto as Exhibit A is the text of the amendment.

Dated this 9th day of September, 2008.

Signature: *Scott Buckley*

Print Name: Scott Buckley
Check One: Member Manager

DO NOT PUBLISH THIS SECTION
The amendment must be executed by a manager if management of the limited liability company is vested in a manager or by a member if management is reserved to the members.

LL-0022
Rev. 08/02/08

Arizona Corporation Commission
Corporations Division

09 SEP 11 09:19 AM '08

Exhibit A

Amending Article 6.

Management Structure:

Management of the LLC is vested in the managers.

Scott Buckley
883 Thibault Rd
Clarkdale, AZ 86324

Sophia Sarano is removed as a member of the LLC.

Executed this ^{9th} ~~9th~~ day of ^{September} ~~August~~, 2009.

Executed by: *Scott Buckley* Scott Buckley
Print Name

09 SEP 11 11:47 AM '09



ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS FOR STATE PUBLIC BENEFITS Professional License and Commercial License Department of Liquor Licenses and Control

Liquor License #: 12133410

Ownership Name: Scott Howard Buckley (as listed on the current liquor license application or renewal application)

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

SECTION I - APPLICANT INFORMATION

APPLICANT'S NAME (Print or type) Scott Howard Buckley DATE 9/8/09 TYPE OF APPLICATION (check one) [] INITIAL APPLICATION [X] RENEWAL TYPE OF LICENSE #12

SECTION II - CITIZENSHIP OR NATIONAL STATUS DECLARATION

Directions: Attach a legible copy of the front, and the back (if any), of a document from the attached List A, or other document that demonstrates U.S. citizenship or nationality. Name of document provided: Birth Certificate

- A. Are you a citizen or national of the United States? (check one) [X] Yes [] No B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country. City Palo Alto State (or equivalent) California Country or Territory U.S.A

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

09 SEP 11 11:47:19 AM '09

SECTION III — ALIEN STATUS DECLARATION

Directions: To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. Name of document provided:

“Qualified Alien” Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- 8. An alien who is, or whose child or child’s parent is a “battered alien” or an alien subjected to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C. § 1101(a)(15).

Alien Paroled into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA.

Other Persons (8 U.S.C. § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*];
- 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present (A.R.S. § 1-501)

- 14. A person not described in categories 1–13 who is otherwise lawfully present in the United States. PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).

SECTION IV — DECLARATION

All applicants must complete this section. I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

09 SEP 11 11:49:14 AM PST PW 3/03


APPLICANT'S SIGNATURE

9/8/09
TODAY'S DATE

Attachment: Lists A and B Evidence of U.S. Citizenship, U.S National Status, or Alien Status,

DLLC 1/15/09

AG 11/08/07 - 81662

Attachment to Form 1 Applicant Statement

EVIDENCE OF U.S. CITIZENSHIP, U.S NATIONAL STATUS, OR ALIEN STATUS

LIST A: U.S. CITIZEN OR U.S. NATIONAL

Note: In this List, the term "Service" refers to the U.S. Citizenship and Immigration Service, formerly, the U.S. Immigration and Naturalization Service (INS).

[Source: Proposed Rules, Verification of Eligibility for Public Benefits, 8 CFR § 104.23; 63 FR 41662-01 August 4, 1998); and Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

Evidence showing U.S. citizen or U.S. national status includes the following:

a. Primary Evidence:

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-561, Certificate of Citizenship;
- (6) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (7) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively naturalized U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (8) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
- (9) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

[Source: Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

b. Secondary Evidence

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status:

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that

09 SEP 11 10:47 AM '09

the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made;

- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;
- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parents(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;
- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a State-or jurisdiction-approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);

c. Collective Naturalization

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

Puerto Rico:

- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or
- Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

U.S. Virgin Islands:

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

d. Derivative Citizenship

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make a determination of derivative U.S. citizenship:

Applicant born abroad to two U.S. citizen parents: Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying possession prior to the applicant's birth.

Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent: Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant

09 SEP 11 14:14:14 PM '19

to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

Applicant born out of wedlock abroad to a U.S. citizen mother: - Evidence of the U.S. citizenship of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

Applicant born in the Canal Zone or the Republic of Panama:

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

e. Adoption of Foreign-Born Child by U.S. Citizen

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

f. U.S. Citizenship By Marriage

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

LIST B: QUALIFIED ALIENS, NONIMMIGRANTS, AND ALIENS PAROLED INTO U.S. FOR LESS THAN ONE YEAR

The documents listed below that are registration documents are indicated with an asterisk ("*").

a. "Qualified Aliens"

Evidence of "Qualified Alien" status includes the following:

Alien Lawfully Admitted for Permanent Residence

- *Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on *I Form I-94.

Asylee

- * Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12(a)(5)";
- * Form I-766 (Employment Authorization Document) annotated "A5";
- Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or
- Order of an immigration judge granting asylum.

Refugee

- * Form I-94 annotated with stamp showing admission under § 207 of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3"

09 SEP 11 11:49 AM '19

Alien Paroled Into the U.S. for a Least One Year

- * Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

Alien Whose Deportation or Removal Was Withheld

- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(10)";
- * Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b)(3) of the INA.

Alien Granted Conditional Entry

- * Form I-94 with stamp showing admission under §203(a)(7) of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3."

Cuban/Haitian Entrant

- * Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6;
- Unexpired temporary I-551 stamp in foreign passport or on * Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d)(5) of the INA.

Alien Who Has Been Declared a Battered Alien or Alien Subjected to Extreme Cruelty

- U.S. Citizenship and Immigration Service petition and supporting documentation

b. Nonimmigrant

Evidence of "Nonimmigrant" status includes the following:

- * Form I-94 with stamp showing authorized admission as nonimmigrant

c. Alien Paroled into U.S. for Less than One Year

Evidence includes:

- * Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA

DLLC 2/13/09

AG 11/08/07 - 81662

09 SEP 11 04:19 PM '09

65824

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141



09 SEP 1 1997
400 W Congress #150
Tucson AZ 85701-1352
(520) 628-6595

CERTIFICATION OF COMPLETED ALCOHOL TRAINING PROGRAM(S)

OBTAIN ORIGINALS OF THIS FORM FROM DLLC-DO NOT PHOTOCOPY, DOCUMENT IS COMPUTER SCANNED. TYPE OR PRINT WITH BLACK INK.

ALCOHOL TRAINING PROGRAM INDIVIDUAL INFORMATION

Scott H. Buckley

Individual Name (Print)

Scott H Buckley

Individual Signature

TYPE OF TRAINING COMPLETED
TRAINER MUST CHECK YES OR NO FOR EACH TYPE

031908
Date Training Completed

YES NO BASIC

YES NO ON SALE

YES NO MANAGEMENT

YES NO OFF SALE

YES NO BOTH

YES NO OTHER

IF TRAINEE IS EMPLOYED BY A LICENSEE:

Main Street Cafe and Pizzeria

NAME OF THE LICENSEE

BUSINESS NAME

LIQUOR LICENSE NUMBER

ALCOHOL TRAINING PROGRAM PROVIDER INFORMATION

Arizona Business Council for Alcohol Education (ABC)

Company or Individual Name

77 East Columbus Ave. #102

Address

Phoenix,
City

Arizona

85012
State

(602) 285-1396
Zip Phone

I Certify the above named individual has successfully completed the specified program(s).

T. J. Kuhn

Trainer Name (Print)

T. J. Kuhn

Trainer Signature

031908
Date

Trainer give original of completed form to trainee, photocopy and maintain completed document for your records.

Mandatory Liquor Law Training for all new applications submitted after Nov. 1, 1997. A.R.S. Section 4-112(G)(2). Completion of the Liquor License Training Courses is required at the issuance of a license.

The person(s) required to attend both the Basic Liquor Law and Management Training, (either on-sale or off-sale), will include all of the following: owner(s), licensee/agent or manager(s) WHO ARE ACTIVELY INVOLVED IN THE DAY TO DAY OPERATION OF THE BUSINESS. Proof of attendance within the last five years for the required courses must be submitted to the Department before the license application is considered complete.

Before acceptance of a Manager's Questionnaire and/or Agent Change for an existing license, proof of attendance for the Basic Liquor Law and Management Training (either on-sale or off-sale) will be required.

THIS FORM IS REQUIRED FOR SERIES
11 & 12 LICENSES ONLY



09 SEP 11 Liq. Dept PM 1 07

STATE OF ARIZONA
DEPARTMENT OF LIQUOR LICENSES AND CONTROL

Licensee: Scott H Buckley
D.B.A.: Main Street Cafe & Pizzeria
License No.: 12133410

BUSINESS DATA REPORT

Period Covered by Report 09 / 01 / 2008 through 08 / 28 / 2009

Please report all sales for the 12 months prior to the expiration date of your liquor license. Businesses operating for 12 months or less are not required to submit this report.

SALES INFORMATION			
Month/Year	Food Sales	Total Liquor Sales	Total Sales
09/08	12990.49	823.15	13813.64
10/08	15635.64	724.59	16360.23
11/08	14396.10	808.00	15204.10
12/08	14653.54	1004.85	15658.39
01/09	14196.66	600.49	14797.15
02/09	18187.78	1509.00	19696.78
03/09	21690.70	1687.75	23378.45
04/09	17483.59	1224.58	18708.17
05/09	21072.95	1735.46	22808.41
06/09	17543.63	2139.75	19683.38
07/09	17492.47	1549.28	19041.75
08/09	15387.80	1532.80	16920.60
Total	\$200731.35	\$15339.70	\$216071.05

Inventory					
	Food Inventory (excludes non-food items)	Beer Inventory	Liquor Inventory	Wine Inventory	Total Inventory
Dollar Amount	2,800	600	440	260	4000

NO RENEWAL WILL BE ISSUED WITHOUT THIS FORM - ALL SECTIONS MUST BE COMPLETE.

I certify that all information presented on this report is true and accurate to the best of my knowledge.

Signature: *Scott H Buckley*

Title: Owner

Date: August 28, 2009

09 SEP 11 Liq. Dept PM 3:19

ARIZONA REVISED STATUTES

09 SEP 11 Ltr. Dept #1137

4-203.F ACQUISITION OF CONTROL

If a person other than those persons originally licensed acquires control over a license or licensee, the person shall file notice of the acquisition with the Director within fifteen business days after such acquisition of control and a list of officers, directors or other controlling persons on a form prescribed by the Director. All officers, directors or other controlling persons shall meet the qualifications for licensure as prescribed by this title. On request, the director shall conduct a preinvestigation prior to the assignment, sale or transfer of control of a license or licensee, the reasonable costs of which, not to exceed one thousand dollars, shall be borne by the applicant. The preinvestigation shall determine whether the qualifications for licensure as prescribed by this title are met. On receipt of notice of an acquisition of control or request of a preinvestigation, the Director shall forward the notice within fifteen days to the local governing body of the city or town, if the licensed premises is in an incorporated area, or the county, if the licensed premises is in an unincorporated area. The Local Governing Body of the city, town or county may protest the acquisition of control within sixty days based on the capability, reliability and qualification of the person acquiring control. If the Director does not receive any protests, the Director may protest the acquisition of control or approve the acquisition of control based on the capability, reliability and qualification of the person acquiring control. Any protest shall be set for a hearing before the Board. Any transfer shall be approved or disapproved within one hundred five days of the filing of the notice of acquisition and control. The person who has acquired control of a license or licensee has the burden of an original application at the hearing, and the board shall make its determination pursuant to section 4-202 and this section with respect to capability, reliability and qualification.

4-203.H RESTRUCTURING

A restructuring of a licensee's business is an acquisition of control pursuant to subsection F of this section and is a transfer of a spirituous liquor license and not the issuance of a new spirituous liquor license if both of the following apply:

1. All of the controlling persons of the licensee and the new business entity are identical.
2. There is no change in control or beneficial ownership.

4-203.I

If subsection H of this section applies, the licensee's history of violations of this title is the history of the new business entity. The Director may prescribe a form and shall require the applicant to provide the necessary information to ensure compliance with this subsection and subsections F and G of this section.

4-202.A AGENT

...A person shall hold a club license, corporation license, limited liability company license, partnership license or out-of-state license through an agent who shall be a natural person and meet the qualifications for licensure. ... For purposes of this subsection, "agent" means a person designated by an applicant or licensee to receive communications from the department and to file documents and sign documents for filing with the department on behalf of the applicant or licensee.

4-209.A FEES; TRANSFER (RESTRUCTURE)

...An application fee for an original license or the transfer of a license shall be one hundred dollars, which shall be retained by this state.

4-209.H FEES; CHANGE OF AGENT

Assignment fees for a change of agent, as provided for in section 4-202, subsection C, shall be one hundred dollars, except that where a licensee holds multiple licenses the assignment fee for the first license shall be one hundred dollars and the assignment fee for all remaining licenses transferred to the same agent shall be fifty dollars each, except the aggregate assignment fees shall in no event exceed one thousand dollars.

09 SEP 11 Ltr. Dept #1137

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA
SAN JOSE, CALIFORNIA

4300-16176

322

CERTIFICATE OF LIVE BIRTH

STATE BIRTH CERTIFICATE NUMBER		STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH			LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
THIS CHILD	1a. NAME OF CHILD—FIRST NAME Scott		1b. MIDDLE NAME Howard		1c. LAST NAME Buckley	
	2. SEX Male	3a. THIS BIRTH, SINGLE TWIN, OR TRIPLET? single	3b. IF TWIN OR TRIPLET, THIS CHILD BORN 1ST, 2ND, 3RD? ---	4a. DATE OF BIRTH—MONTH, DAY, YEAR [REDACTED]	4b. HOUR 3:30 P. M.	
PLACE OF BIRTH	5a. PLACE OF BIRTH—NAME OF HOSPITAL Stanford University Hospital			5b. STREET ADDRESS (STREET AND NUMBER, OR LOCATION) ---		5c. INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO) No
	5d. CITY OR TOWN Stanford			5e. COUNTY Santa Clara		
MOTHER OF CHILD	6a. MAIDEN NAME OF MOTHER—FIRST NAME Marina		6b. MIDDLE NAME Wilson		6c. LAST NAME (MARRIED SURNAME) Iannelli	
	8. AGE OF MOTHER (AT TIME OF THIS BIRTH) 26 YEARS	9a. SOCIAL SECURITY NUMBER [REDACTED]	9. COLOR OR RACE OF MOTHER Caucasian		10a. RESIDENCE OF MOTHER—STREET ADDRESS (STREET AND NUMBER, APO, ADDRESS, OR LOCATION) 5639 El Sereno Ave.	
	10c. RESIDENCE OF MOTHER—CITY OR TOWN Los Altos			10d. RESIDENCE OF MOTHER—COUNTY Santa Clara		10e. RESIDENCE OF MOTHER—STATE California
	10f. RESIDENCE OF MOTHER—CITY OR TOWN Los Altos		10g. RESIDENCE OF MOTHER—COUNTY Santa Clara		10h. RESIDENCE OF MOTHER—STATE California	
FATHER OF CHILD	11a. NAME OF FATHER—FIRST NAME Howard		11b. MIDDLE NAME Talbot		11c. LAST NAME Buckley	
	12. AGE OF FATHER (AT TIME OF THIS BIRTH) 38 YEARS	13a. SOCIAL SECURITY NUMBER OF FATHER 147-26-6092	14. COLOR OR RACE OF FATHER Caucasian		15a. PRESENT OR LAST OCCUPATION Physician	
DEFORMANT'S CERTIFICATION	16a. PARENT OR OTHER INFORMANT—SIGNATURE (IF OTHER THAN PARENT, SECRET) <i>Marina Iannelli</i>			16b. DATE REVIEWED AND SIGNED BY INFORMANT 12-26-73		
	17a. PHYSICIAN OR OTHER PERSON WHO ATTENDED THIS BIRTH—SIGNATURE—DEGREE OR TITLE <i>William Aronson, M.D.</i>			17b. DATE SIGNED BY PHYSICIAN OR OTHER ATTENDANT 12-24-73		
ATTENDANT'S CERTIFICATION	17c. ADDRESS William Aronson, M.D. Palo Alto, Calif.			17d. PHYSICIAN'S CALIFORNIA LICENSE NUMBER 59770		
	19. LOCAL REGISTRAR—SIGNATURE <i>W. Elwyn Sumner, M.D.</i>			20. DATE ACCEPTED FOR REGISTRATION BY LOCAL REGISTRAR JAN 8 1974		
LOCAL REGISTRAR	19. LOCAL REGISTRAR—SIGNATURE			21. DATE OF LAST LIVE BIRTH		22. DATE OF LAST FETAL DEATH

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA }
COUNTY OF SANTA CLARA }

SS

I, Regina Alcomendras, Santa Clara County Clerk-Recorder, do hereby certify that this is a true and exact reproduction of the document officially registered in my office. Witness my hand and official seal this _____ day

By _____

Deputy

This copy not valid unless prepared on engraved border displaying seal and signature of Deputy County Clerk-Recorder.



* R 0 1 2 4 4 9 5 5 *



Regina Alcomendras
REGINA ALCOMENDRAS,
COUNTY CLERK-RECORDER

September 09 20 *09*