

ARIZONA DEPARTMENT OF LIQUOR LICENSES AND CONTROL

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

AFFIDAVIT OF POSTING

Date of Posting: 12/24/14 Date of Posting Removal: _____

Applicant Name: Cohen Pamela Karen
Last First Middle

Business Address: 2092 N Hwy 90 Huachuca City 85616
Street City Zip

License #: 06020020

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.

MIKE SPANGLER SENIOR INSPECTOR 432-9251
Print Name of City/County Official Title Telephone #

[Signature] 1/14/15
Signature Date Signed

Return this affidavit with your recommendation (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.

Individuals requiring special accommodations please call (602) 542-9027