

State of Arizona
Department of Liquor Licenses and Control

Created 03/20/2019 @ 01:17:21 PM

Local Governing Body Report

LICENSE

Number: Type: 013 FARM WINERY
Name: WOODS BAY WINERY
State: Pending
Issue Date: Expiration Date:
Original Issue Date:
Location: 4920 E CHAMBERS ROAD
WILLCOX, AZ 85643
USA
Mailing Address: 66 E CANTERBURY COURT
PHOENIX, AZ 85022
USA
Phone: (602)769-1099
Alt. Phone:
Email: RUSSCO1@MSN.COM

AGENT

Name: BRIAN KEITH RUSSELL
Gender: Male
Correspondence Address: 66 E CANTERBURY COURT
PHOENIX, AZ 85022
USA
Phone: (602)769-1099
Alt. Phone:
Email: RUSSCO1@MSN.COM

OWNER

Name: RUSSCO CONTRACTING INC
Contact Name: BRIAN KEITH RUSSELL
Type: CORPORATION
AZ CC File Number: 09621594 State of Incorporation: AZ
Incorporation Date: 09/08/2000
Correspondence Address: 66 E CANTERBURY COURT
PHOENIX, AZ 85022
USA
Phone: (602)769-1099
Alt. Phone:
Email: RUSSCO1@MSN.COM

Officers / Stockholders

Name: Title: % Interest:

**RUSSCO CONTRACTING INC -
Director/PRESIDENT**

Name: BRIAN KEITH RUSSELL
Gender: Male
Correspondence Address: 66 E CANTERBURY COURT
PHOENIX, AZ 85022
USA

Phone: (602)769-1099
Alt. Phone: (602)769-1099
Email: RUSSCO1@MSN.COM

APPLICATION INFORMATION

Application Number: 56853
Application Type: New Application
Created Date: 03/20/2019

QUESTIONS & ANSWERS

013 Farm Winery

- 1) If you intend to operate the business while your application is pending you will need an interim permit pursuant to A.R.S. §4-203.01. Would you like to apply for an Interim Permit?
If yes, after completing this application, please go back to your Licensing screen, under New License Application choose "Interim Permit" from the drop-down window.
No
- 2) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.
Yes
- 3) Are you a tenant? (A person who holds the lease of a property; a lessee)
No
- 4) Is there a penalty if lease is not fulfilled?
No
- 5) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)
No
- 6) Are you the owner?
Yes
- 7) Are you a purchaser?
No
- 8) Are you a management company?
No
- 9) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 10) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
0
- 11) Have you provided a diagram of your premises?
Yes
- 12) Is there a drive through window on the premises?
No
- 13) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
NONE
- 14) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No

* 3/20 - AP*

State of Arizona
Department of Liquor Licenses and Control

Created 03/20/2019 @ 01:17:21 PM

Local Governing Body Report

LICENSE

Number: [REDACTED] Type: 013 FARM WINERY
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 WILLCOX, AZ 85643
 USA
 Mailing Address: 66 E CANTERBURY COURT
 PHOENIX, AZ 85022
 USA
 Phone: (602)769-1099
 Alt. Phone:
 Email: RUSSCO1@MSN.COM

RECEIVED
COCHISE COUNTY
BOARD OF SUPERVISORS

2019
-4
PM 1:06

AGENT

Name: BRIAN KEITH RUSSELL
 Gender: Male
 Correspondence Address: 66 E CANTERBURY COURT
 PHOENIX, AZ 85022
 USA
 Phone: (602)769-1099
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OWNER

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Officers / Stockholders

Name:	Title:	% Interest:
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**RUSSCO CONTRACTING INC -
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Name: BRIAN KEITH RUSSELL
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APPLICATION INFORMATION

Application Number: 56853
Application Type: New Application
Created Date: 03/20/2019

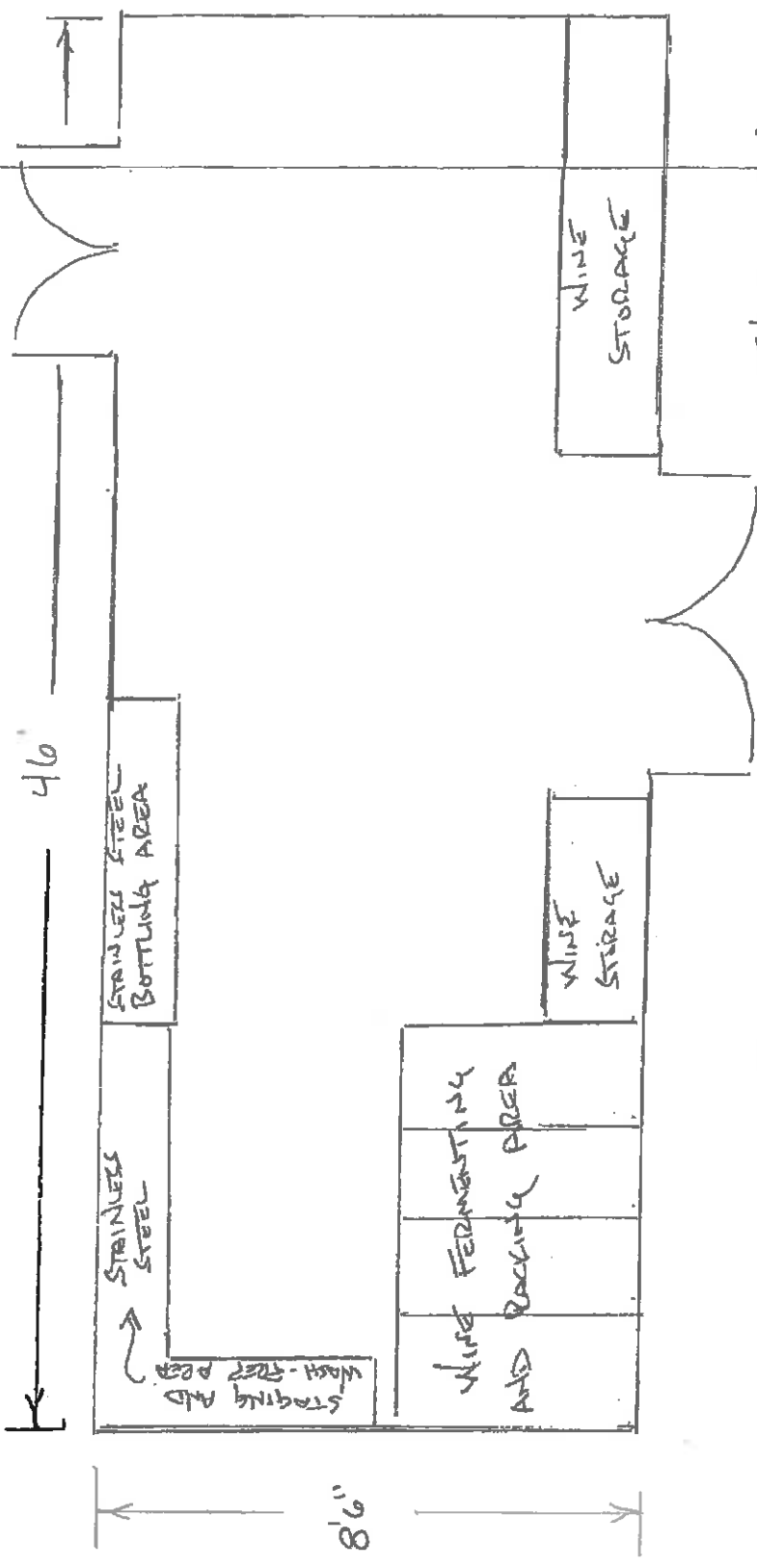
QUESTIONS & ANSWERS

013 Farm Winery

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If yes, after completing this application, please go back to your Licensing screen, under New License Application choose "Interim Permit" from the drop-down window.
No
- 2) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.
Yes
- 3) Are you a tenant? (A person who holds the lease of a property; a lessee)
No
- 4) Is there a penalty if lease is not fulfilled?
No
- 5) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)
No
- 6) Are you the owner?
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- 7) Are you a purchaser?
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- 8) Are you a management company?
No
- 9) Is the Business located within the incorporated limits of the city or town of which it is located?
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- 10) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
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- 11) Have you provided a diagram of your premises?
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- 12) Is there a drive through window on the premises?
No
- 13) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
NONE
- 14) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No

Woods Bay Winery
602-769-1099

TOTAL SQ. FT. 391



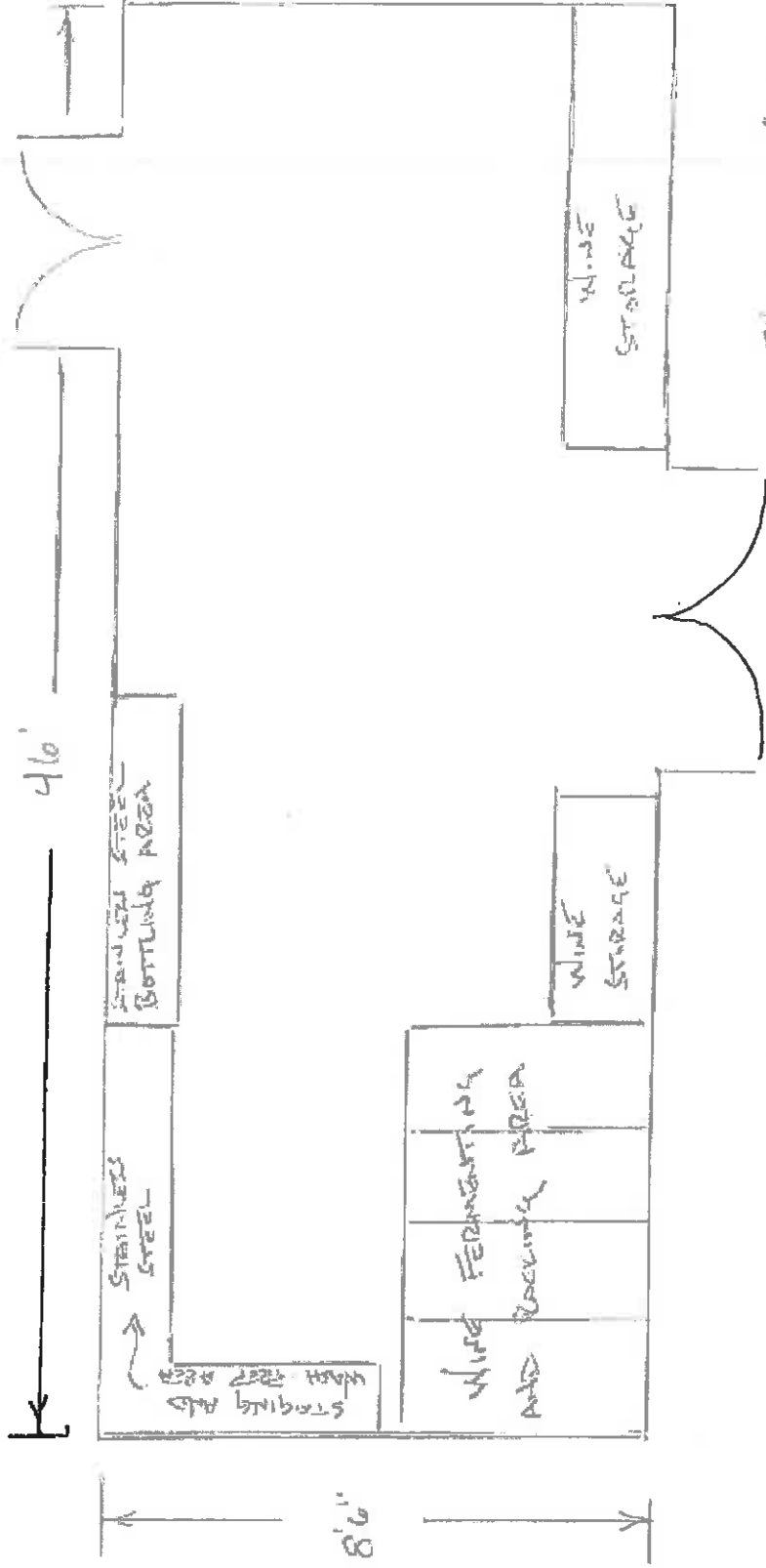
TWO DOORS (DEAD BOLTS)
NO WINDOWS
SECURED AND MONITORED
BY A.D.T. SYSTEMS

19 APR 20 11:47 AM '17

NOT TO SCALE

Woods Bay Winery
602.769.1099

TOTAL SQ. FT. 391



TWO DOORS (DEAD BOLTS)
NO WINDOWS
SECURED AND MONITORED
BY A.I.D.T. SYSTEMS

© 2014 WOODS BAY WINERY, LIC. # 1117

NOT TO SCALE



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

19 MAR 20 11:41 AM

QUESTIONNAIRE
 A.R.S. §4-202, 4-210
 Type or Print with **Black Ink**

The fees allowed by R19-1-102 will be charged for all dishonored checks. **FP Current 3/9/18**

ATTENTION APPLICANT: This is a legally binding document. Please type or print in **black ink**. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor license#: 56853

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person <input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager <small>(complete all questions except #12)</small>
--	---

2. Name: RUSSELL BRIAN KEITH Birth Date: 03/09/1956
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Driver License #: [REDACTED] State: ARIZONA

4. Place of birth: [REDACTED] Height: [REDACTED] Weight: [REDACTED] Eyes: [REDACTED] Hair: [REDACTED]
City State COUNTRY (not county)

5. Name of current/most recent spouse: RUSSELL TONI Birth Date: 07/21/1955
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? Yes No If yes, what is your date of residency: 1/15/1961

7. Daytime telephone number: 602-769-1099 E-mail address: RUSSELL@MSN.COM

8. Business Name: WOODS BAY WINERY Business Phone: 602-769-1099

9. Business Location Address: 4920 E. CHAMBERS WILCOX AZ COCHISE 85643
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years. If unemployed, retired, or student, list residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
1999	CURRENT	PRESIDENT	RUSSELL CONTRACTING 606 E. CANTERBURY CT. PHOENIX, AZ. 85022
MARCH			

(ATTACH ADDITIONAL SHEET IF NECESSARY)

RECEIVED
COCHISE COUNTY
BOARD OF SUPERVISORS

11. Provide your residence address information for the last five (5) years: A.R.S. §4-202(D)

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
01/2013	CURRENT	606 E. CANTERBURY COURT PAPER, AZ 85022

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises? Yes No
If you answered YES, then answer #13 below. If NO, skip to #14.
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? Yes No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? Yes No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses pending against you? (Do not include civil traffic tickets.) A.R.S. §4-202.4-210 Yes No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement.
Give complete details including dates, agencies involved and dispositions.
CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

NOTARY

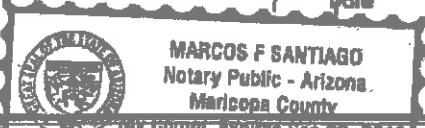
I (Print Full Name) Brian Keith Puzos hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: [Signature] State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this 29th Day of November 2018

My Commission Expires on: 11/29/19 Date

[Signature]
Signature of Notary



The Licensee has authorized the person named on this questionnaire to act as manager for the above License.

PRINT NAME: Brian Keith Puzos SIGNATURE: [Signature]



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

**ARIZONA STATEMENT OF CITIZENSHIP
 OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

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), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

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 a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I - APPLICANT INFORMATION

INDIVIDUAL OWNER/AGENT NAME (Print or type)

BRIAN KEITH RUSSELL

SECTION II - CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States?

Yes

No

If Yes, indicate place of birth:

City HAMPTON State (or equivalent) VIRGINIA Country or Territory USA

If you answered Yes, 1) Attach a legible copy of a document from the attached list.

2) Name of document:
 Go to Section IV.

BIRTH CERTIFICATE / PASSPORT / DL

If you answered No, you must complete Section III and IV.

SECTION III – ALIEN STATUS DECLARATION

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 a document from the attached list or other document as evidence of your status.

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/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject 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.] Non immigrants 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

- 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 and evidence I have given are true and correct to the best of my knowledge.

Brian Keith Russell

Individual Owner/Agent Printed Name



Individual Owner/Agent Signature

11/27/2018

Today's Date

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

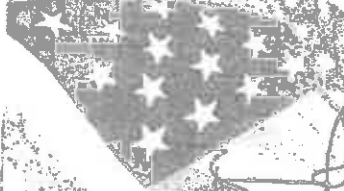
You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed 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)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

We the People

*Of the United States,
in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves and
our Posterity, do ordain and establish this
Constitution for the United States of America.*



SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSEPORT
PASAPORTE

UNITED STATES OF AMERICA



Surname / Nom / Cognome

RUSSELL

Given Name / Prénoms

BEN KETH

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

Date of birth / Lieu de naissance / Fecha de nacimiento

Date of issue / Date de délivrance / Fecha de expedición

Date of issue / Date de délivrance / Fecha de expedición

SEE PAGE 5



USA

11120781

Certificate of Completion

For

Title 4 BASIC Liquor Law Training

<input type="checkbox"/>	On-sale
<input checked="" 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 on a participant 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. Does meet 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

Brian Russell

Full Name (please print)

Signature

10/02/2017

Training Completion Date

10/02/2020

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**

Instructor Name (please print)

certify that the above named individual did successfully complete 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-approved for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

08/28/2017 October 2017

Instructor Signature

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
- Government (series 5)
 - Conveyance (series 8)
 - Restaurant (series 12)
 - Liquor Store (series 9)
 - In-State Farm Winery (series 13)
 - Liquor license applications (first and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.
 - Microbrewery (series 3)
 - Hotel/Motel/Restaurant (series 11)
 - Beer & Wine Bar (series 7)
 - Private Club (series 14)
 - Beer & Wine Store (series 10)

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

11120732

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

Brian Russell

Full Name (please print)

10/06/2017

Signature

10/06/2020

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

Instructor Name (please print)

Certify that the above named individual did successfully complete 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

09/26/2017

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)
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)

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.

July 11, 2013

19 MAR 20 10:41 AM '13

Russco Contracting

66 E Canterbury Court
Phoenix, Arizona 85022


March 9, 2019

To Whom It May Concern:

I, Brian Keith Russell (DOB 03/09/1956), sole owner of the property at 4920 E. Chambers Rd. Willcox, Arizona 85643 will allow, permit and invite Woods Bay Winery to grow grapes as well as to produce wine at said location and address.

Please accept this letter as an acceptance of approval for Russco Contracting DBA Woods Bay Winery, to establish operations at my property in Willcox, AZ.

Thank You.
Brian Keith Russell
602 769 1099
Russco1@msn.com



Brian K. Russell

3/9/2019

Date

DEPARTMENT OF THE TREASURY - ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

1. PERMIT NUMBER

AZ-W-21045

BASIC PERMIT

(Under Federal Alcohol Administration Act)

2. DATE OF PERMIT

01/24/2018

5. NAME AND ADDRESS OF PERMITTEE (Number and street, city or town, State and Zip Code)

RUSSCO CONTRACTING, INC.

DBA: WOODS BAY WINERY

4920 E CHAMBERS RD
WILLCOX, AZ 85643

3. REGISTRY NUMBER (if applicable)

BWN-AZ-21042

4. DATE OF APPLICATION FOR AMENDMENT

01/30/2019



6. TRADE NAMES AUTHORIZED BY THIS PERMIT (Trade name approval does not constitute approval as a brand name for labeling purposes. If needed, list on reverse or use continuation sheet.)

7. PERMIT GRANTED FOR (ONE TYPE OF OPERATION ONLY)

Pursuant to the application of the date indicated in item 4, you are authorized and permitted to engage, at the above address, in the business of:

- a. Distilled Spirits - distiller rectifier (processor) warehouseman and/or warehouseman and bottler and while so engaged, to sell, offer or deliver for sale, contract to sell or ship, in interstate or foreign commerce, the distilled spirits so distilled or rectified, or warehoused and bottled, or the wines so rectified,
- b. Wine - producer and blender blender and while so engaged, to sell, offer or deliver for sale, contract to sell or ship, in interstate or foreign commerce, the wine so produced or blended,
- c. Importer - Importing into the United States the following alcoholic beverages: while so engaged, to sell, offer to deliver for sale, contract to sell or ship, in interstate or foreign commerce, the alcoholic beverages so imported,
- d. Wholesaler - Purchasing for resale at wholesale the following alcoholic beverages: while so engaged, to receive or to sell, offer or deliver for sale, contract to sell or ship, in interstate or foreign commerce, the alcoholic beverages so purchased.

*19 MAR 20 14:11:18 PM 118

This Permit is conditioned upon your compliance with the Federal Alcohol Administration Act; the Twenty-first Amendment and laws relating to its enforcement; all other Federal laws relating to distilled spirits, wine, and malt beverages, including taxes with respect to them; the Federal Water Pollution Control Act; and, all applicable regulations made pursuant to law which are now, or may hereafter be, in force.

This basic permit is effective from the date shown above and will remain in force until suspended, revoked, annulled, voluntarily surrendered, or automatically terminated.

THIS PERMIT WILL AUTOMATICALLY TERMINATE THIRTY DAYS AFTER ANY CHANGE IN PROPRIETORSHIP OR CONTROL OF THE BUSINESS, unless an application for a new basic permit is made by the transferee or permittee within the thirty day period. If an application for a new basic permit is timely filed, the outstanding basic permit will continue in effect until the application is acted on by the District Director, Alcohol and Tobacco Tax and Trade Bureau.

THIS PERMIT IS NOT TRANSFERABLE. ANY CHANGE IN THE TRADE NAME, CORPORATE NAME, MANAGEMENT OR ADDRESS OF THE BUSINESS COVERED BY THIS PERMIT, OR ANY CHANGE IN STOCK OWNERSHIP (MORE THAN 10%) MUST BE REPORTED TO THE NATIONAL REVENUE CENTER OR PUERTO RICO FIELD OFFICE WITHOUT DELAY.

THIS IS AN

ORIGINAL PERMIT

AMENDED PERMIT

REASON FOR AMENDMENT

DATE OF AMENDMENT

See Attached

03/14/2019

SIGNATURE AND TITLE OF AUTHORIZED TTB OFFICIAL

Deborah Smith

FOR JOHN J. MANFREDA, ADMINISTRATOR

AUTHORIZED TRADE NAMES

~~*Used for Contract Bottling or Packaging/Branding Purposes~~

PERMIT NUMBER: AZ-W-21045

REGISTRY NUMBER: BWN-AZ-21042

~~TYPE~~

~~TRADE NAME~~

REASON FOR AMENDMENT

Change in Premises Location

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU (TTB)

APPLICATION TO ESTABLISH AND OPERATE WINE PREMISES

1. SERIAL NUMBER
2019030

2. DATE
01/30/2019

3. REGISTRY NUMBER (Leave blank if new applicant) BWN-AZ-21042

(See instructions on next page)

4. TO: DIRECTOR, NATIONAL REVENUE CENTER
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU (TTB)
550 Main St., Suite 8002, Cincinnati, Ohio 45202-5215

5. APPLICATION IS MADE TO OPERATE (Check one only)
 BONDED WINERY BONDED WINE CELLAR TAX PAID WINE BOTTLING HOUSE

6. NAME AND PRINCIPAL BUSINESS ADDRESS OF APPLICANT
(Name and street, city, county, State, and ZIP Code)

RUSSCO CONTRACTING, INC.
DBA: WOODS BAY WINERY
66 E. CANTERBURY CT.
PHOENIX AZ 85022
PHONE # EIN# 86-1002539

7. ADDRESS (Address where wine operations will occur.)
(If different from address in item 6)
4920 E CHAMBERS RD
WILLCOX, AZ 85643
PHONE #

8. PURPOSE FOR WHICH FILED (Such as original establishment, trade name change, alternation of premises)

Original: New Premises or change in Proprietorship Alternating Proprietorship with:
Amended for: Change in Location Change in Control (Date) Alternating Premises with:
 Change in information on application Other: Please Specify
 Change in Officers Change in Name of Proprietor or Trade Name

9. I am or am not required to furnish a bond under 27 CFR 24.146. I am not required to furnish a bond only if all of the following are true: I will withdraw wine for deferred payment of tax under 27 CFR 24.271, I was liable for not more than \$50,000 in wine taxes in the preceding calendar year, I reasonably expect to be liable for not more than \$50,000 in such taxes during the current calendar year, and I have no operations or withdrawals involving wine for industrial use.

10A. NUMBER OF PAGES ATTACHED TO THIS FORM ().

10A-1. PAGES FROM CURRENT APPROVED TTB F 5120.25 THAT REMAIN

PAGE NUMBERS

PAGE NUMBERS

10B. ORGANIZATIONAL DOCUMENTS SUBMITTED WITH THIS FORM
(List each document)

10B-1. ORGANIZATIONAL DOCUMENTS FILED WITH PRIOR APPROVED TTB F 5120.25 (List each document)

Lease Agreement or Proof of Property Ownership, Diagram

10C. ORGANIZATIONAL DOCUMENTS FILED IN CONNECTION WITH ANOTHER ESTABLISHMENT BUT INCORPORATED IN THIS APPLICATION BY REFERENCE (List each document, and show the name or plant number under which filed)

NO WINE MAY BE PRODUCED OR UNTAXPAID WINE RECEIVED UNTIL THE PREMISES AND OPERATIONS ARE APPROVED BY THE DIRECTOR, NATIONAL REVENUE CENTER.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS APPLICATION AND, TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, AND COMPLETE.

11. SIGNATURE

Brian Keith Russell

12. TITLE

president

FOR TTB USE ONLY

APPLICATION IS

APPROVED DISAPPROVED

EFFECTIVE DATE

03/14/2019

SIGNATURE OF DIRECTOR, NATIONAL REVENUE CENTER

Deborah Smith

DATE

03/14/2019

GENERAL INSTRUCTIONS

1. Each person desiring to conduct the operations of a bonded wine cellar, a bonded winery, or a taxpaid wine bottling house must file this application, in duplicate, with the Director, National Revenue Center, Alcohol and Tobacco Tax and Trade Bureau (TTB), at the address in item 4.
2. The application information required will be on letter-sized paper with each attached page identified with the name of the applicant, the serial number of the application and the number of the page.
3. The proprietor is responsible for keeping information of an approved application current and complete. When required by 27 CFR Part 24, the proprietor must submit an amended application with supplemental or replacement pages or other documents necessary to update the previously approved application. Replacement pages must be numbered to correspond to the pages being replaced.
4. If this application is for a taxpaid wine bottling house, you will not conduct spirits operations or need a bond, so paragraphs 6 and 7 of the specific instructions are not applicable.
5. Applications must be submitted in accordance with the instructions on this form and in 27 CFR Part 24. Incomplete applications will be returned to the applicant without action.

SPECIFIC INSTRUCTIONS

- Item 1. **SERIAL NUMBER.** Applications on this form must be serially numbered, commencing with serial number 1 for original establishment, and continuing in sequence for each subsequent application. Applications for a taxpaid wine bottling house will be filed separately and likewise begin with serial number 1.
- Items 6 & 7. **NAME AND ADDRESS.** The address must be stated as explicitly as possible with a ZIP Code. If located in a city, the numbered street address and the name of the city will be given. If a rural address, give the name of the county and nearest post office, with the approximate distance and direction there from, including the name or number of the road or highway on which situated.

ATTACHED STATEMENTS AND DOCUMENTS

1. **BUSINESS ORGANIZATION.** If a statement is already on file with TTB for another authorization, only reference that authorization by name, address, and registry number per 27 CFR 24.108(k). Attach a statement, if not already on file, showing the type of business organization (e.g., sole owner, partnership, corporation, limited liability company) and the persons having an interest in the business supported by the following:

For corporations or limited liability companies:

- (a) Charter or certificate of existence, incorporation, or organization,
- (b) Names and addresses of officers, directors, members and managers.
- (c) Certified extracts of minutes authorizing certain individuals to sign.
- (d) Statement showing the number of shares/ownership of each class of stock/interest authorized and outstanding, and the voting rights of the respective owners or holders.
- (e) Statement of interest: Names and addresses of the 10 persons having the largest ownership or other interest and nature and amount of the stockholding or other interest of each, whether the interest appears in the name of the interested party or in the name of another party. The Director, National Revenue Center may request the names of interested persons if the applicant corporation or LLC is wholly owned or controlled by another corporation or LLC.

For partnerships:

True copies of articles or partnership agreement, if any, and of the certificate of partnership where required to be filed by local authority.

2. **WINE PREMISES.** Describe each tract of land comprising the wine premises. Description must be by directions and distances, in feet and inches, with sufficient particularity to enable ready examination of the boundary of the wine premises. Describe the means employed to afford security of the wine premises. Describe where and how any taxpaid wine will be stored on the premises and the means used to segregate and identify taxpaid wine from untaxpaid wine. Describe any alternating areas. Each wine premises building must be described as to size, construction, and use. Buildings not used for the wine operations must be described only as to size and use. If wine premises consists of a partial building, rooms or floors, each must be described separately. Means of ingress and egress from the wine premises to adjoining portions must be described.
 - (a) If operating a bonded winery or bonded wine cellar in a residential building, describe how the bonded premises are segregated from the residence and what direct access to the bonded premises is available.
 - (b) If in an alternating proprietorship arrangement, provide a copy of the alternation agreement showing that each proprietor will conduct independent operations.

3. **DISCLOSURE.** If this application is not for a bonded wine premises in which production operations will be conducted and, thus a Federal Alcohol Administration Act basic permit is not required, would you agree to the listing of your name in a TTB publication which may be distributed to the general public upon request? A "no" response will have no effect on the consideration of this application. Under 26 U.S.C. 6103, you have a legal right not to give this release.
4. **TRADE NAME.** List each trade name to be used in connection with the wine operations. If State or local law requires registration, certify that each trade name is registered. State the operating name if other than the name in item 6. If a trade name is listed in any basic permit issued, such trade name is not required to be included in this application.
5. **SPIRITS OPERATIONS.** Describe any operation which will involve the use of spirits.
6. **BONDS AND PERMITS.** With respect to this application, list all basic permits and bonds (including those filed with this application) showing the name and the surety for each bond. Information related to bonds need not be provided if no bond is required under 27 CFR 24.146.
7. **VOLATILE FRUIT-FLAVOR CONCENTRATE OPERATIONS.** For volatile fruit-flavor concentrate producers, submit a step-by-step description of the production process, commencing with obtaining the juice through each step of the process to removal of the concentrate from the system. For production of high-proof concentrate (more than 24 percent alcohol), indicate any step in the process at which the spirits are potable. Include the maximum quantity in gallons of fruit must and volatile fruit-flavor concentrate produced in 24 hours; the maximum and minimum fold; and the maximum percent of alcohol in the concentrate for each kind of fruit used.
8. **OTHER OPERATIONS.** Describe any other operations not specifically authorized by Part 24 that are to be conducted on the wine premises. This must include a list of the premises and any major equipment used, and a statement as to the relationship, if any, of the operation to the wine operations. These other operations need not be restricted to alcohol-related businesses.

PRIVACY ACT INFORMATION

The following information is provided pursuant to Section 3 of the Privacy Act of 1974 (5 U.S.C. 552a(e)(3)):

1. **AUTHORITY.** Solicitation of this information is made pursuant to 28 U.S.C. 5356. Disclosure of this information by the applicant is mandatory if the applicant wishes to obtain authorization for operating a bonded wine cellar, a bonded winery, or a taxpaid wine bottling house.
2. **PURPOSE.** To identify the applicant, to identify the nature, location, and the extent of the premises, the specific type or types of operations to be conducted on the premises, and to determine the eligibility of the applicant to register the wine premises.
3. **ROUTINE USES.** The information will be used by TTB to make determinations set forth in paragraph 2. In addition, the information may be disclosed to other Federal, State, foreign, and local law enforcement and regulatory agency personnel to verify information on the form where such disclosure is not prohibited by law. The information may further be disclosed to the Justice Department if it appears that the furnishing of false information may constitute a violation of Federal law. Finally, the information may be disclosed to members of the public in order to verify the information on the form where such disclosure is not prohibited by law.
4. **EFFECTS OF NOT SUPPLYING REQUESTED INFORMATION.** Failure to supply complete information will delay processing and may result in the denial of the application.

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. This information collection is used by TTB to determine if the applicant is eligible to receive a wine premises permit. The information is required to obtain a benefit.

The estimated average burden associated with this collection of information is 15 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to Reports Management Officer, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau, 1310 G Street, NW, Box 12, Washington, DC 20005.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current, valid OMB control number.