

State of Arizona
Department of Liquor Licenses and Control

Created 03/25/2020 @ 04:02:03 PM

Local Governing Body Report

LICENSE

Number:		Type:	012 RESTAURANT
Name:	DUSTY'S CHUCKWAGON GRILL & SALOON		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	13510 S HIGHWAY 191 ELFRIDA, AZ 85625 USA		
Mailing Address:	7216 HWY 92 HEREFORD, AZ 85615 USA		
Phone:	(000)000-0000		
Alt. Phone:	(520)285-6612		
Email:	CHUCKWAGONLLC@GMAIL.COM		

AGENT

Name:	BOBBY EUGENE DOUGLAS
Gender:	Male
Correspondence Address:	7216 HWY 92 HEREFORD, AZ 85615 USA
Phone:	(520)285-6612
Alt. Phone:	
Email:	CHUCKWAGONLLC@GMAIL.COM

OWNER

Name:	SONOITA CHUCK WAGON GRILL LLC		
Contact Name:	BOBBY DOUGLAS		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	L19148492	State of Incorporation:	AZ
Incorporation Date:			
Correspondence Address:	7216 HWY 92 HEREFORD, AZ 85615 USA		
Phone:	(520)285-6612		
Alt. Phone:			
Email:	CHUCKWAGONLLC@GMAIL.COM		

Officers / Stockholders

Name:
BOBBY EUGENE DOUGLAS

Title:
MANAGING MEMBER

% Interest:
100.00

**SONOITA CHUCK WAGON GRILL LLC -
MANAGING MEMBER**

Name: BOBBY EUGENE DOUGLAS

Gender: Male

Correspondence Address: 7216 HWY 92
HEREFORD, AZ 85615
USA

Phone: (520)285-6612

Alt. Phone:

Email: CHUCKWAGONLLC@GMAIL.COM

APPLICATION INFORMATION

Application Number: 103185
Application Type: New Application
Created Date: 03/25/2020

Azee

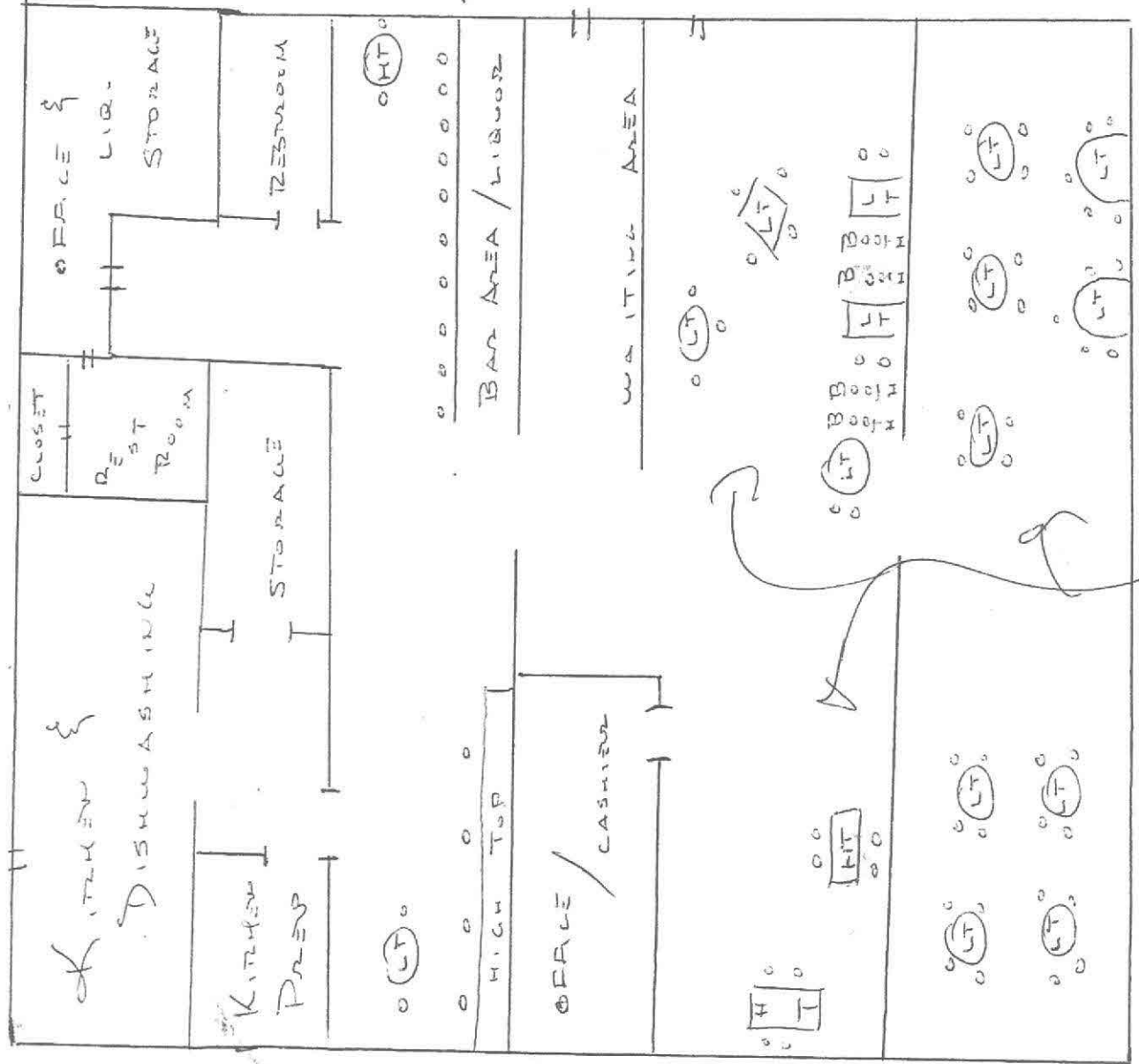
QUESTIONS & ANSWERS

012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Are you one of the following? Please indicate below.
Property Tennant
Sub-tenant
Property Owner
Property Purchaser
Property Management Company
Property Tenant
- 3) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
Landlord Lockout
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?
No
If no, in what City, Town, County or Tribal/Indian Community is this business located?
Cochise County
- 5) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
Noe-Capital Contribution
- 6) Is there a drive through window on the premises?
No
- 7) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
No
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
05/01/2020

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
QUESTIONNAIRE	Bobby Q Attach Training Certs ASF AZDL.pdf	03/19/2020
DIAGRAM/FLOOR PLAN	Floor Plan.pdf	03/19/2020
MENU	Menu.pdf	03/19/2020
RESTAURANT OPERATION PLAN	Rest Op Plan.pdf	03/19/2020
RECORDS REQUIRED FOR AUDIT	RRFA.pdf	03/19/2020



BAR AREA

FRONT ENTRANCE

SERVICE

DINING AREA

Approx. 3,000 SQ FT



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

DLIC USE ONLY
 Job #: 103185

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RESTAURANT OPERATION PLAN

1. Name of restaurant (Please print): DUSTY'S CHUCKWAGON GRILL & SALOON

2. List equipment below by Make, Model, and Capacity : **(PROVIDE THE FOLLOWING ITEMS ONLY, NO ATTACHMENTS)**

Grill	1-2' SS Flat Top, 1-3' SS char grill
Oven	1-3' SS 6 Burner Gas stove top w/oven, 1-2 1/2' SS Pizza oven
Freezer	1-7' SS 2 Door Upright
Refrigerator	1-7' SS 3 Door Upright, 1-6' SS 2 Door Floor Unit, 1-3' SS Single Door Floor Unit, 1-6' SS SAND.
Sink	1-2 1/2' SS Sink, 1-9' SS "L" 3 Comp. w/ Dual Sinks, 1-1 1/2' x 1 1/2' SS HAND
Dish Washing Facilities	1-PRO CLEAN COMM.
Food Preparation Counter (Dimensions)	1-8' SS PREP, 1-5' SS PREP w/ CAN OPENER, 2-5' SS PREP
Other	3- ELEC. MICROWAVES, 1-SS 3 ELEC. BLENDER, 1- ELEC. BEARD MACHINE, 1- ELEC. CROCK POT

1- COMM. ICE MACHINE, 2-SS COMM. ELEC. WASHERS, 2- 2 BASKET 30 Flat Plates, 1-10' HOOD w/ ANSUL

3. Attach a copy of your full menu including prices (examples: Breakfast, Lunch, Dinner, and Nonalcoholic beverages).

4. List the seating capacity for:

a. Restaurant dining area of your premises: **(Do not include patio seating)** 1 80 1

b. Bar area of your premises: [+ 10]

c. Total dining and bar seating capacity of your premises: = 90 1

5. What Type of dinnerware and utensils are utilized within your restaurant?
 Reusable Disposable Both

6. Does your restaurant have a bar area that is distinct and separate from the dining area? YES No
 (If yes, what percentage of the public floor space does this area cover?) 10 %

7. What percentage of your public premises is used primarily for restaurant dining?
 (Do not include kitchen, bar, hi-top tables, or game area.) 90 %

8. Does your restaurant contain any games, televisions, or any other entertainment? YES No
 (If yes, specify what types and how many (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

1 - 65" Flat Screen TV
 4 - 53" Flat Screen TV

9. Do you have live entertainment or dancing? YES No
 (If yes, what type and how often 8.5
 example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

10. Use space below to list how many employees for each position to fully staff your business.

Position	How many
Cooks	3
Bartenders	2
Hostesses	1
Managers	2
Servers	2
Other (Dishwasher)	1
Other ()	
Other ()	

I, BOBBY EUGENE DOUGLAS, hereby declare that I am the APPLICANT filing this application.
 I have read this application and the contents and all statements true, correct and complete.

X [Signature]
 (Signature of APPLICANT)

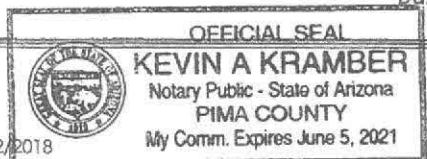
NOTARY

State of Arizona County of Pima

The foregoing instrument was acknowledged before me this March day of 2022
Day Month Year

My Commission Expires on: 06/05/2021
Date

[Signature]
 Signature of Notary Public





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

RECORDS REQUIRED FOR AUDIT
Applies to Series 11 (Hotel/Motel W/Restaurant) & Series 12 (Restaurant) Only

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

1. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
2. A list of **all** food and liquor vendors
3. The restaurant menu used during the audit period
4. A price list for alcoholic beverages during the audit period
5. Mark-up figures on food and alcoholic products during the audit period
6. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
7. Monthly inventory Figures - beginning and ending figures for food and liquor
8. Chart of accounts (copy)
9. Financial Statements-Income Statements-Balance Sheets
10. General Ledger
 - A. Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
 - 3) Dated Guest Checks
 - 4) Coupons/Specials/Discounts
 - 5) Any other evidence to support income from food and liquor sales
 - B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks
11. Tax Records
 - A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
 - B. Income Tax Return - city, state and federal (copies)
 - C. Any supporting books, records, schedules or documents used in preparation of tax returns
12. Payroll Records
 - A. Copies of all reports required by the State and Federal Government
 - B. Employee Log (A.R.S. §4-119)
 - C. Employee time cards (actual document used to sign in and out each work day)
 - D. Payroll records for all employees showing hours worked each week and hourly wages

13. Off-site Catering Records (must be complete and separate from restaurant records)

- A. All documents which support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

**REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH
A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).**

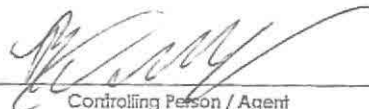

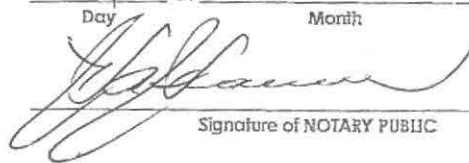
A.R.S. §4-210(A)7

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(G)

For the purpose of this section:

- 1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
- 2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises, regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

NOTARY	
I, (Print Full Name) <u>BOBBY EUGENE DOUGLAS</u> , have read and understand all aspects of this statement	
X (Signature) <u></u> Controlling Person / Agent	State of <u>Arizona</u> County of <u>Pima</u> the foregoing instrument was acknowledged before me this
My commission expires on: <u>06/05/2021</u>	<u>17</u> Day of <u>March</u> 20 <u>20</u> Month Year
	<u></u> Signature of NOTARY PUBLIC

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE



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

20 MAR 25 11:14 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 5-31-2019

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#: 103185

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person	<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager (complete all questions except #12)
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2. Name: DOUGLAS BOBBY EUGENE Birth Date: [REDACTED]
Last First Middle (NOT a public record)

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

4. Place of birth: LAS CRUCES NM USA Height: 5'08" Weight: 195 Eyes: Hazel Hair: Brown
City State COUNTRY (not county)

5. Name of current/most recent spouse: SINGLE - N/A Birth Date: N/A
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: 1968

7. Daytime telephone number: (520) 285-6612 E-mail address: CHUCKWAGON LLC @ Gmail.com

8. Business Name: DUSTY'S CHUCKWAGON GRILL & SALOON Business Phone: 7216 HWY 92

9. Business Location Address: 13510 S. HIGHWAY 191 ELFRIDA AZ COCHISE 85625
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)
05/2019	CURRENT	OWNER	CHUCKWAGON GRILL 7216 HWY 92 HENEFORD, AZ 85015
09/2018	05/2019	UNEMPLOYED	4631 WILKINSHAM HENEFORD, AZ 85015
06/2014	09/2018	OWNER	SONOITA CHUCKWAGON GRILL 3179 HWY 83 SONOITA, AZ 85637

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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
01/2019	CURRENT	4631 WILKINSHAM HENDERSON, AZ 85615
05/2005	01/2019	29 ABBY LN. SONOITA, AZ 85637

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. If NO, skip to #14. Yes No
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) BOBBY EUGENE DOUGLAS 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 Pima

The foregoing instrument was acknowledged before me this 15th Day of March 2020

My Commission Expires on: 06/05/2021 Date

[Signature]
Signature of Notary

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

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

PRINT NAME: _____ SIGNATURE: _____

Bobby Douglas
4631 Wickersham
Hereford, AZ 85615

To Whom It May Concern:

#14.


I Bobby Douglas on December 23rd, 2015 was involved in a rollover accident. At the time of the accident it was determined that emergency care was needed. My son and I were brought to the nearest emergency room at University Medical Hospital on Ajo Way in Tucson, AZ. UMC has my medical history from over the last 10 years.

I was attended to in the ER where a surgeon was called in to work on my arm that was damaged. I was released Christmas Eve (December 24th, 2015) at 4 am and was then arrested for violating a restraining order.

I had a restraining order from an ex-girlfriend of over 10 years who happened to be working that night at the ER I was taken to. I did not ask anyone about her, I did not know she was working in the ER that night and I was not aware of her job status. I was later released on bond Christmas Eve. And I was sentenced to community service and fines which I have completed and paid.

Please contact me with any questions at 520-285-6612.

Thank you,


Bobby Douglas

20 APR 25 11:41 AM '12

Bobby Douglas
4631 Wickersham
Hereford, AZ 85615

To Whom It May Concern:

I Bobby Douglas have the address of 29 Abby Lane on my driver's license which I resided at for over 16 years. I recently moved to 4631 Wickersham Hereford, AZ 85615 back in February of 2019.

I have recently opened up a new business and have not had the time to update my driver's license.

Please contact me with any questions at 520-285-6612.

Thank you,

A handwritten signature in cursive script that reads "Bobby Douglas". The signature is written in black ink and is positioned above the printed name.

Bobby Douglas



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) BOBBY EUGENE DOWDAS

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 LAS CRUCES State (or equivalent) NM Country or Territory USA

If you answered **Yes**, 1) Attach a legible copy of a document from the attached list.
 2) Name of document: AZ. Drivers License
 Go to Section IV.

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).

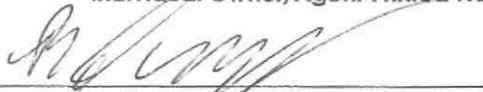
SECTION IV - DECLARATION

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.

BOBBY EUGENE DOULLAS

Individual Owner/Agent Printed Name


Individual Owner/Agent Signature

3-17-2020

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.

ARIZONA DRIVER LICENSE USA

NOT FOR FEDERAL IDENTIFICATION

9 CLASS D
10 END NONE
12 REST B
13 DLN
1 DOB

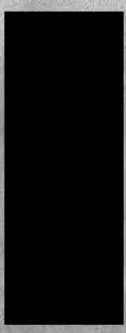
1 DOUGLAS
2 BOBBY EUGENE
3 29 ABBY LN
4 SONOITA, AZ 85637

4b EXP 06/07/2027 4c ISS 08/23/2017

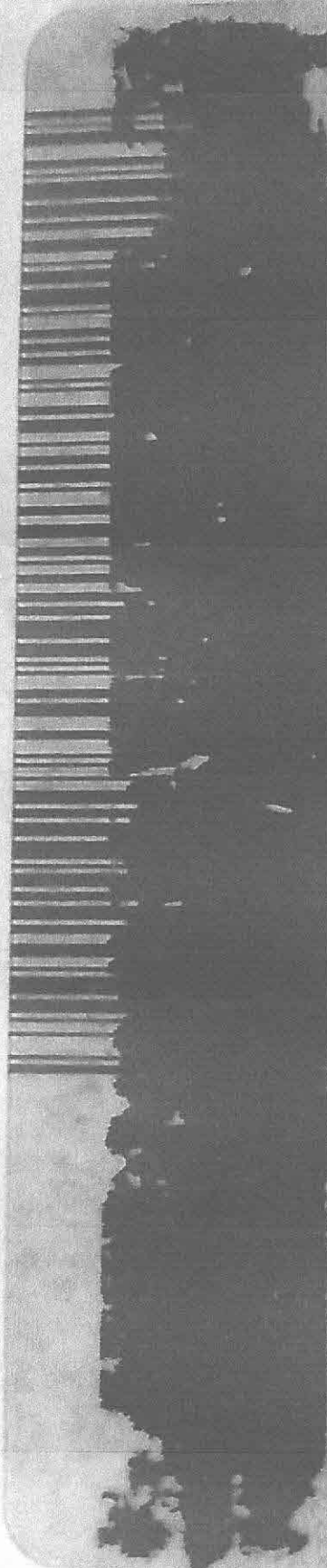
15 SEX M 14 EYES HAZ
16 HGT 5'-08" 18 HAIR BRO
17 WGT 195 lb



Bobby Douglas



20 MAR 25 11:41 AM '13

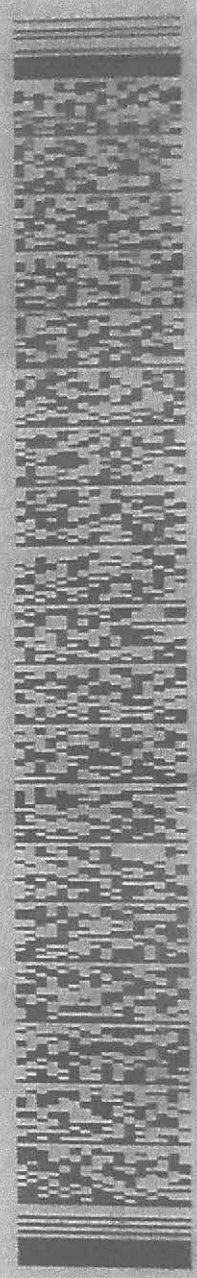


CLASS: D-Operator
ENDORSEMENTS:
None

RESTRICTIONS:
B-Corrective Lens Must Be Worn

Rev 02/14/2014

You Must Report a
Change of Address
Within 10 Days



17235A20012762040301

Certificate # _____

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

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

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

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

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

Student Information

Bobby Douglas
Full Name (please print)

Bobby Douglas
Signature

JANUARY 16, 2020
Training Completion Date

JANUARY 16, 2023
Certificate Expiration Date
(three years from completion date)

Training Provider Information

AZLiquorTraining.com

Company Name

536 East Wagon Bluff Drive Tucson, AZ 85704

Mailing Address

(520) 235-5684
Daytime Contact Phone Number

I, KEVIN A. KRAMBER, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

[Signature]
Instructor Signature

16 / 01 / 2020
Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
| Conveyance (series 8) | Liquor Store (series 9) | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12) | In-state Farm Winery (series 13) | | Beer & Wine Store (series 10) |

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The 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.

20 MAR 25 11:41 AM '13

Certificate # _____

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

BOBBY DOUGLAS
Full Name (please print)

Bobby Douglas
Signature

JANUARY 16, 2020

Training Completion Date

JANUARY 16, 2023

Certificate Expiration Date
(three years from completion date)

*20 MAR 25 11:41 AM '23

Training Provider Information

AZLiquorTraining.com

Company Name

536 East Wagon Bluff Drive Tucson, AZ 85704

Mailing Address

(520) 235-5684

Daytime Contact Phone Number

I, KEVIN A. KRAMBER, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 MANAGEMENT Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code [A.A.C.]R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

Kevin A. Kramber
Instructor Signature

16 / 01 / 2020
Day Mo Year

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2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
Beer & Wine Store (series 10)

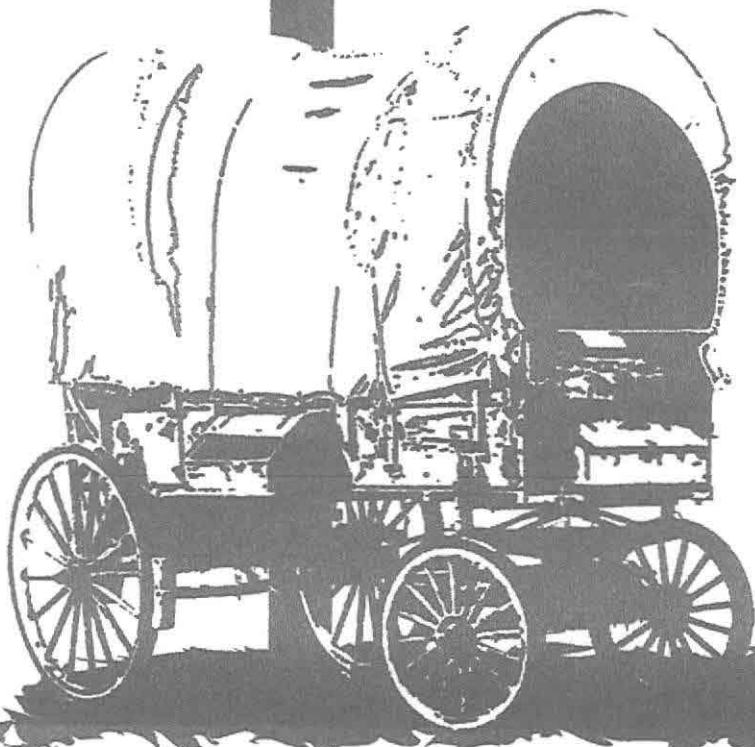
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BREAKFAST
LUNCH
& DINNER

CHUCK WAGON HEREFORD, AZ GRILL

COME AND GET IT!



MORNIN' GRUB

BREAKFAST COMES WITH HOME FRIES OR HASH BROWNS AND YOUR CHOICE OF TOAST (WHITE, WHEAT, RYE, SOURDOUGH) OR AN ENGLISH MUFFIN.

BREAKFAST SANDWICH 6.99 (EGG, CHEESE WITH BACON, SAUSAGE OR HAM ON HAMBURGER BUN, BISCUIT OR ENGLISH MUFFIN)	3 EGG OMELET, 2 FIXIN'S 8.99 (BACON, SAUSAGE, HAM, TOMATOES, ONIONS, GREEN CHILES, BLACK OLIVES, MUSHROOMS, PEPPERS)
BREAKFAST BURRITO 7.99 (EGG, HOME FRIES, CHEESE WITH BACON, SAUSAGE OR HAM) NO TOAST INCLUDED	2 PANCAKES, 3PC. BACON OR 2PC. SAUSAGE 6.99
2 EGGS, YOUR CHOICE OF 3PC. BACON OR 2PC. SAUSAGE 7.99	3 PANCAKES, 3PC. BACON OR 2PC. SAUSAGE 8.99
2 EGGS, HAM 8.99	2 FRENCH TOAST, 3PC. BACON OR 2 PC. SAUSAGE 8.99
2 EGGS, CORNED BEEF HASH 10.99	WAFFLE, 3 PC. BACON OR 2PC. SAUSAGE 8.99
CHICKEN FRIED STEAK, 2 EGGS 11.99	BISCUITS, SAUSAGE GRAVY HALF 3.49 FULL 4.99



EARLY BIRD (7-9 A.M.) 4.99
1 EGG, 2 PC. BACON OR 1PC. SAUSAGE AND 1 SLICE TOAST

Cochise County Health Department advises that eating raw or undercooked animal foods such as meat, poultry, eggs, milk, seafood, shellfish, or animal foods that are not otherwise processed or prepared to eliminate harmful bacteria, poses a potential health risk to everyone, especially the elderly, young children under the age of 4 years, pregnant women, and other highly susceptible individuals with compromised immune systems. Thorough cooking or processing of foods to eliminate pathogens reduces the risk of illness.

MORNIN' STRAGGLERS

1 Egg 1.49	2 FRENCH TOAST 3.99
3 PC. BACON 2.99	2 SLICES TOAST 1.49
2 PC. SAUSAGE 2.99	ENGLISH MUFFIN 1.49
SLICE OF HAM 3.99	CORNED BEEF HASH 3.99
2 PANCAKES 3.99	OATMEAL 2.99

KIDS MENU

1 EGG, CHOICE OF 1 PANCAKE OR 1 FRENCH TOAST, 1 SLICE OF BACON 4.49
1 EGG, HASH BROWNS, 1 SLICE OF BACON, 1 SLICE OF TOAST 4.49
GRILLED CHEESE, FRIES 4.99
CHICKEN TENDERS, FRIES 5.49
HOT DOG, FRIES 4.99

RUSTLER'S SANDWICHES


ALL SANDWICHES ARE SERVED WITH YOUR CHOICE OF FRIES, POTATO SALAD OR MACARONI SALAD.
CHOICE OF PROVOLONE, SWISS OR AMERICAN CHEESE.
UPGRADE TO ONION RINGS FOR \$1.99.

GRILLED CHEESE ON 3 SLICES OF TOAST	5.99	HAM SUB	8.99
HOT HAM, CHEESE ON 3 SLICES OF TEXAS TOAST	8.99	TURKEY SUB	8.99
HOT PASTRAMI, CHEESE.....	8.99	BACON, LETTUCE, TOMATO	8.99
REUBEN (WITH THOUSAND ISLAND, KRAUT)	8.99	CLUB (TURKEY, HAM, BACON)	8.99
TURKEY REUBEN	8.99	TRIPLE (HAM, TURKEY, ROAST BEEF)	8.99
BBQ BEEF ON HAMBURGER BUN.....	8.99	BEEF OR CHICKEN PHILLY CHEESE STEAK.....	8.99
FRENCH DIP (WITH AU JUS)	8.99	1/4 LB. HOT DOG	8.99
MEATBALL	8.99	SONORAN DOG	8.99
ROAST BEEF (COLD)	8.99	(ONIONS, TOMATOES, PINTO BEANS, CHEESE)	

STEER BURGERS

ALL BURGERS ARE SERVED WITH YOUR CHOICE OF FRIES, POTATO SALAD OR MACARONI SALAD. CHOICE OF PROVOLONE, SWISS OR AMERICAN CHEESE. UPGRADE TO ONION RINGS FOR \$1.99.

1/3 LB. HAMBURGER ... 8.99 1/2 LB. HAMBURGER ... 10.99

OR YOUR CHOICE OF 	• CHEESE BURGER
	• BACON CHEESE BURGER
	• MUSHROOM BURGER WITH SWISS CHEESE
	• SOUTHWEST BURGER (SWISS CHEESE, SALSA, GREEN CHILES)
1/3 LB. BURGER ... 9.99	• WESTERN BURGER (BACON BBQ SAUCE, ONION RING)
1/2 LB. BURGER ... 11.99	• TERIYAKI BURGER (PINEAPPLE, BACON, TERIYAKI SAUCE)
	• CAJUN BURGER (MUSHROOMS, CAJUN SAUCE, ONIONS)
	• CHILI BURGER (OPEN FACED WITH CHEESE, ONIONS)
	• PATTY MELT

COMANCHE CHICKEN

ALL SANDWICHES ARE SERVED WITH YOUR CHOICE OF FRIES, POTATO SALAD OR MACARONI SALAD.
CHOICE OF PROVOLONE, SWISS OR AMERICAN CHEESE. UPGRADE TO ONION RINGS FOR \$1.99.

CHICKEN BREAST SANDWICH	9.99	SWISS CHICKEN (SWISS, AVOCADO, SPROUTS)	11.99
WESTERN CHICKEN	11.99	CAJUN CHICKEN	11.99
(BACON, BBQ SAUCE, ONION RING)		(MUSHROOMS, CAJUN SAUCE, ONIONS)	
MUSHROOM CHICKEN	11.99	TERIYAKI CHICKEN (PINEAPPLE, BACON).....	11.99
SOUTHWEST (SWISS, SALSA, GREEN CHILES)	11.99		

SIoux SALADS

YOUR CHOICE OF DRESSING INCLUDES RANCH, BLUE CHEESE, THOUSAND ISLAND OR ITALIAN.

SIDE SALAD	3.99	GRILLED CHICKEN SALAD	8.99
(LETTUCE, CUCUMBER, TOMATOES, CROUTONS)		(GRILLED CHICKEN, LETTUCE, TOMATO, ONIONS, AVOCADO, CHEESE, CROUTONS)	
GARDEN SALAD	5.99	TACO SALAD	8.99
(LETTUCE, TOMATO, CUCUMBER, ONIONS, BLACK OLIVES, CHEDDAR CHEESE, CROUTONS)		(GROUND BEEF, LETTUCE, CHEESE, PINTO BEANS, SALSA, AVOCADO, TOMATOES, ONIONS)	
CHEF SALAD	8.99		
(LETTUCE, TOMATO, CHEDDAR, AMERICAN, PROVOLONE CHEESE, HAM, TURKEY, ROAST BEEF, BOILED EGG)			

SADDLE BAGS

FRIES	3.99
ONION RINGS	5.99
CHILI BOWL	4.99
SOUP OF THE DAY	4.99
CHICKEN TENDER BASKET, FRIES	8.99
SHRIMP BASKET, FRIES	8.99

STRAGGLERS

SIDE OF POTATO SALAD	2.49
EXTRA DRESSING75
SOUR CREAM75
SAUERKRAUT75
JALAPEÑOS, PEPPERONCINI OR GREEN CHILES75
SALSA75
CHILI OR NACHO CHEESE	1.99

WHISTLE WETTERS

COKE, DIET COKE, DR. PEPPER, SPRITE, ROOT BEER,	
ORANGE, MOUNTAIN DEW	2.29
COFFEE	2.29
COFFEE TO-GO	2.29
TEA (UNSWEET, SWEET, RASPBERRY)	2.29
LEMONADE	2.29
ORANGE JUICE	2.49
APPLE JUICE	2.49
MILK	2.99



PIZZA

DINE-IN OR CARRY OUT

LARGE 16" ... 10.99

TOPPING: 1.99 EACH

MEDIUM 12" ... 8.99

TOPPING: 1.25 EACH

SMALL 8" ... 5.99

TOPPING: .75 EACH

TOPPING: MEATS & VEGGIES

PEPPERONI
ITALIAN SAUSAGE
CANADIAN BACON

HAM
HAMBURGER
BACON

BLACK OLIVES
ONIONS
GREEN BELL PEPPERS
TOMATOES

PINEAPPLES
MUSHROOMS
JALAPEÑOS

APPETIZERS

MOZZARELLA STICKS 7.99

CHILI CHEESE FRIES 4.99

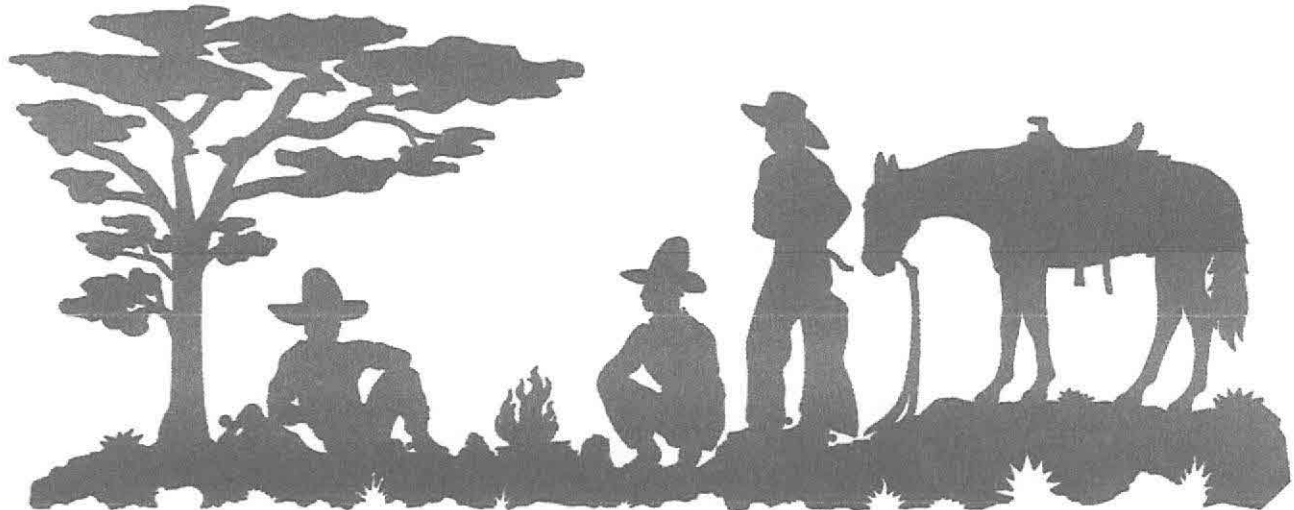
JALAPEÑO POPPERS 4.99

WINGS, FRIES 7.99

(BBQ, HOT, GARLIC PARMESAN OR TERIYAKI)

NACHOS SUPREME..... HALF 7.99 FULL 13.99

(TORTILLA CHIPS, GROUND BEEF OR CHICKEN, NACHO CHEESE, BEANS, LETTUCE, ONIONS,
TOMATOES, GREEN CHILES, SOUR CREAM, SALSA)



DESSERTS

CHOCOLATE CAKE	4.99
CARROT CAKE	4.99
WHITE OR VANILLA CAKE	4.99
APPLE, CHERRY OR BLUEBERRY PIE.....	3.99
A LA MODE.....	ADD 1.00
PECAN PIE	4.99
BROWNIES	1.99
CHEESECAKE	3.99
CHOCOLATE CREAM PIE	3.99
COCONUT CREAM PIE	3.99
BANANA CREAM PIE	3.99

ICE CREAM

CAKE CONE OR BOWL	1 SCOOP 1.99	ADD A SCOOP99
WAFFLE BOWL	1 SCOOP 2.49	ADD A SCOOP99
WAFFLE CONE	1 SCOOP 2.49	ADD A SCOOP99
SUNDAE			3.89
BROWNIE SUNDAE			4.89
(CHOICE OF SUNDAE TOPPINGS: STRAWBERRY, PINEAPPLE, CHOCOLATE)			
BANANA SPLIT			5.89
MILK SHAKES	16 OZ. 4.49	24 OZ. 5.49	

