

**State of Arizona**  
**Department of Liquor Licenses and Control**

Created 06/09/2023 @ 09:54:23 AM

Local Governing Body Report

**LICENSE**

Number:	Type:	010 BEER AND WINE STORE
Name:	CULLUMS COUNTRY CUPBOARD	
State:	Pending	
Issue Date:	Expiration Date:	
Original Issue Date:		
Location:	1036 E EASTLAND ROAD PEARCE, AZ 85625 USA	
Mailing Address:	1036 E EASTLAND ROAD PEARCE, AZ 85625 USA	
Phone:	(520)826-1492	
Alt. Phone:	(520)559-6798	
Email:	CULLUMSCOUNTRYCUPBOARD@GMAIL.COM	

**AGENT**

Name:	JACK HAROLD CULLUM
Gender:	Male
Correspondence Address:	1036 E EASTLAND ROAD PEARCE, AZ 85625 USA
Phone:	(520)559-6798
Alt. Phone:	
Email:	CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

**OWNER**

Name:	CULLUMS COUNTRY CUPBOARD LLC	
Contact Name:	JACK CULLUM	
Type:	LIMITED LIABILITY COMPANY	
AZ CC File Number:	23499737	State of Incorporation: AZ
Incorporation Date:	03/13/2023	
Correspondence Address:	1036 E EASTLAND ROAD PEARCE, AZ 85625 USA	
Phone:	(520)559-6798	
Alt. Phone:		
Email:	CULLUMSCOUNTRYCUPBOARD@GMAIL.COM	

Officers / Stockholders

Name:  
JACK HAROLD CULLUM

Title:  
Member

% Interest:  
100.00

### **CULLUMS COUNTRY CUPBOARD LLC - Member**

Name: JACK HAROLD CULLUM  
Gender: Male  
Correspondence Address: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Phone: (520)559-6798  
Alt. Phone:  
Email: CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

## **APPLICATION INFORMATION**

Application Number: 247154  
Application Type: New Application  
Created Date: 05/26/2023

## **QUESTIONS & ANSWERS**

### **010 Beer and Wine Store**

- 1) Are you applying for an Interim Permit (INP)?  
Yes  
A Document of type INTERIM PERMIT (INP) NOTARY PAGE is required.
- 2) Provide name, address, and distance of nearest school.  
(If less than one (1) mile note footage)  
Pearce Elementary School  
1487 E School Rd  
Pearce, AZ 85625  
5.1 miles
- 3) Are you one of the following? Please indicate below.  
Property Tenant  
Subtenant  
Property Owner  
Property Purchaser  
Property Management Company  
Property Owner/Purchaser
- 4) Is there a penalty if lease is not fulfilled?  
No
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?  
Yes
- 6) What is the total money borrowed for the business not including the lease?  
Please list each amount owed to lenders/individuals.  
\$170000 (for commercial property)-Timothy & Melba Heine 380 N Geneva Estates Rd, Pearce, AZ 85625
- 7) Are there walk-up or drive-through windows on the premises?  
No
- 8) Does the establishment have a patio?  
No

- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
No

## DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
ALIEN STATUS	Alien Status signed.pdf	05/26/2023
DIAGRAM/FLOOR PLAN	Diagram Floor Plan.pdf	05/26/2023
INTERIM PERMIT (INP) NOTARY PAGE	Interim Permit Notary Page.pdf	05/26/2023
ORGANIZATIONAL DOCUMENTS	Cullums Country Cupboard EIN.pdf	05/26/2023
ORGANIZATIONAL DOCUMENTS	ACC Good Standing.pdf	05/26/2023
ORGANIZATIONAL DOCUMENTS	TPT License 2023.pdf	05/26/2023
QUESTIONNAIRE	Agent Controlling Person Questionnaire.pdf	05/26/2023
SECTION 5 INTERIM PERMIT	Interim Permit Notary Page.pdf	05/26/2023
QUESTIONNAIRE	Arrest & Disposition Statement.docm	05/26/2023
QUESTIONNAIRE	Basic Liquor Training Jack Cullum.pdf	05/26/2023
SECTION 5 INTERIM PERMIT	Heine Liquor License.pdf	05/26/2023
QUESTIONNAIRE	Management Liquor Training Jack Cullum.pdf	05/26/2023
QUESTIONNAIRE	Manager Questionnaire.pdf	05/26/2023
QUESTIONNAIRE	Statement of Arrest & Disposition signed.pdf	05/26/2023
QUESTIONNAIRE	Jack Cullum ID.jpg	05/26/2023

**State of Arizona**  
**Department of Liquor Licenses and Control**

Created 06/09/2023 @ 09:54:24 AM

Local Governing Body Report

**LICENSE**

Number: INP020023940                      Type: INP INTERIM PERMIT  
Name: CULLUMS COUNTRY CUPBOARD  
State: Active  
Issue Date: 06/09/2023                      Expiration Date: 09/22/2023  
Original Issue Date: 06/09/2023  
Location: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Mailing Address: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Phone: (520)826-1492  
Alt. Phone: (520)559-6798  
Email: CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

**AGENT**

Name: JACK HAROLD CULLUM  
Gender: Male  
Correspondence Address: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Phone: (520)559-6798  
Alt. Phone:  
Email: CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

**OWNER**

Name: CULLUMS COUNTRY CUPBOARD LLC  
Contact Name: JACK CULLUM  
Type: LIMITED LIABILITY COMPANY  
AZ CC File Number: 23499737                      State of Incorporation: AZ  
Incorporation Date: 03/13/2023  
Correspondence Address: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Phone: (520)559-6798  
Alt. Phone:  
Email: CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

**Officers / Stockholders**

Name:  
JACK HAROLD CULLUM

Title:  
Member

% Interest:  
100.00

### **CULLUMS COUNTRY CUPBOARD LLC - Member**

Name: JACK HAROLD CULLUM  
Gender: Male  
Correspondence Address: 1036 E EASTLAND ROAD  
PEARCE, AZ 85625  
USA  
Phone: (520)559-6798  
Alt. Phone:  
Email: CULLUMSCOUNTRYCUPBOARD@GMAIL.COM

## **APPLICATION INFORMATION**

Application Number: 247160  
Application Type: New Application  
Created Date: 05/26/2023

## **QUESTIONS & ANSWERS**

### **INP Interim Permit**

- 1) Enter License Number currently at location  
010020017307
- 2) Is the license currently in use?  
YES
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page?  
YES

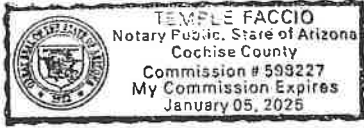
**SECTION 5 Interim Permit**

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. § 4-203.01. For approval of an interim permit: There must be a valid license of the same series currently issued to the location.

1. Current license number at the location: 010020017307 2. Is the license currently in use?  Yes  No
2. If the license is **NOT** currently in use, how long has it been since the license was last used at this location? \_\_\_\_\_

I (Print Full Name) Timothy Heine hereby declare that I am the Current Owner, Agent, or Controlling Person on the stated license and location.

Sign in front of Notary: *Timothy Heine*  
(Current Agent/Individual as listed on the license certificate)

State of <u>Arizona</u> County of <u>Cochise</u> Signed before me on this <u>24<sup>th</sup></u> day of <u>May</u> , 20 <u>23</u> . Notary Signature <u>Temple Faccio</u> My commission expires on <u>01 / 05 / 2024</u>	 Notary Seal
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**SECTION 6 Background Check**

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. If the applicant is an entity, and not an individual, answer questions 1a-b.

- a) Date Incorporated/Organized: 03/13/2023 State where Incorporated/Organized: AZ
- b) AZ Corporation or AZ L.L.C. Entity No: 23499737 Approval Date: 03/13/2023

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
Cullum, Jack	Harold		managing member	100	PO Box 782, Pearce, AZ			85625

(Attach additional sheet if necessary)

LC:  
Amount:

23 JUN 1 11:47 AM '10



# AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLIC USE ONLY  
Job #: 247184  
Date Accepted: 5/9/23  
CSR: CA

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

Type or Print with Black Ink

License Number:

Jos. 380

**ATTENTION APPLICANT:** This is a legally binding document. 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 will be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED ACCORDINGLY AND SUBMITTED TO THE DEPARTMENT WITH A BLUE OR BLACK LINED FINGERPRINT CARD AND \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE.

1. Check the Appropriate Box  Agent  Controlling Person

2. Name: Cullum Jack Harold Birth Date: [REDACTED]  
Last First Middle (NOT a public record)

3. Social Security #: [REDACTED] Drivers License #: [REDACTED] State Issued: AZ

4. Place of birth: Marion, IL USA Height: 5'8" Weight: 190 Eyes: green Hair: brown  
City State COUNTRY

5. Name of current/most recent spouse: Cullum, Angela Dawn Birth Date: [REDACTED]  
Last First Middle (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes  No  If yes, what is your date of residency? 06/2015

7. Daytime telephone number: 520-559-6798 Email address: jcullum013@gmail.com

8. Premises Name: Cullums Country Cupboard LLC Business Phone: 520, 826, 1492

9. Premises Address: 1036 E Eastland Rd, Cochise, AZ Cochise 85606  
Street (do not use PO Box) City State County Zip

Pearce CA

25 CA

10. List your employment or type of business during the past five (5) years, if unemployed, retired, or student, list place of residence address. (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
10/2020	CURRENT	owner	J & J Waterworks llc, 1136 E Goldminers Cir, Pearce, AZ 85625
03/2017	10/2020	Operations Manager	Southwestern Utility Mgmt, 2015 S Forbes Blvd #107, Tucson, AZ 85745

11. Provide your residence address information for the last five (5) years A.R.S. §4-202(D) (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	To Month/Year	Street	City	State	Zip
03/2022	CURRENT	1136 E Goldminers Cir, Pearce, AZ 85625			
12/2019	03/2022	1215 Treasure Rd, Sunsites, AZ 85625			
07/2019	12/2019	320 Sage St, Sunsites, AZ 85625			
02/2019	07/2019	304 E Toughnut St, Tombstone, AZ 85638			
06/2015	02/2019	971 E Gila Dr, Douglas, AZ 85607			

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As an Agent or Controlling Person, will you be managing the day to day operation of the licensed premises? If you answered YES, then answer #13 below. If NO, skip to #14 Yes  No
13. Have you attended a DLEC approved Basic and Management Liquor Law Training Course within the past 3 years? **MUST** attach copies of both training certificates. 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 summons 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

I, (Print Full Name) **Jack Harold Cullum** hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Signature: Jack Harold Cullum Date: 05/23/2023





# ALIEN STATUS

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

Type or Print with **Black Ink**

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

APPLICANT NAME (Print or type) Jack Harold Cullum

## 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 Marion State Illinois COUNTRY USA

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

2) Name of document: Arizona Drivers License

If you answered **No**, you must complete Sections III.

#14.5

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Jack Harold Cullum

Statement of Arrest & Disposition

My wife, [REDACTED], and I had been having marital problems for a few months. We owned a few rental properties together. On February 25, 2022, I came home from work about 5:30pm. I told my wife that I was going to move into one of our rental properties, in hopes a short separation would help us resolve our issues. My wife got very upset, said that I had no right to any of our properties and that I was not allowed to move there. She started yelling at me saying to get out of the house. I left the room, went into the family room and started doing paperwork for my company.

About 15 minutes later, [REDACTED] came out of our bedroom and went outside. About 5 or 10 minutes later, three Cochise County Sheriff's Officers came inside our house. The officers asked me what happened and I advised them of the above. The officers told me that [REDACTED] said I grabbed her by the wrist and threw her on the bed. I told them that didn't happen, that she was lying and she had been planning our separation for months. The arresting officer asked me if I had anywhere to go. I told him no...not knowing that I could have stayed in a motel to avoid arrest. The officer placed me under arrest for disorderly conduct/fighting and took me to Willcox Jail.

On February 26, 2022, I was arraigned at Willcox Justice Court. I was released on my own recognizance and told a hearing would be scheduled. The Cochise County Deputy Attorney advised me on June 16, 2022, that if I completed a conflict resolution class, the charges would be dismissed. I completed the class on June 17, 2022. The case was dismissed with prejudice on August 29, 2022.

  
Jack Harold Cullum

**EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, & ALIEN STATUS**

23 JUN 1 09:13 AM '11

**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 Jan. 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.

SECTION III – QUALIFIED ALIEN DECLARATION PN 1 Lic. Lic. PW 2 11

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.
- 14. **Otherwise Lawfully Present**
- 15. 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. §

Jack Harold Cullum

Print Name



Signature

05/23/2023

Date

AMENDMENT

ARIZONA

DRIVER LICENSE

USA

NOT FOR FEDERAL IDENTIFICATION

9 CLASS D  
0A END NONE  
12 REST NONE

4# DLN

3 DOB

1 GULLUM  
2 JACK HAROLD  
8 1215 E TREASURE RD  
PEARCE, AZ 85624-0004



*Jack Gullum*

4b EXP 10/28/2031

4a ISS 09/01/2020

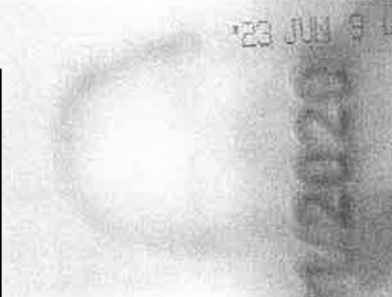
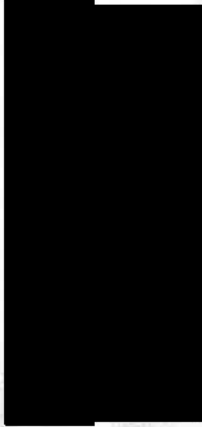
16 SEX M  
16 HGT 5'-08"  
17 WGT 195 lb

14 EYES GRN  
19 HAIR BRO

DONOR

5 DD 02890006AC053709

23 JUL 9 10:47 AM



ARIZONA

DRIVER LICENSE

NOT FOR FEDERAL IDENTIFICATION



*Cullum*

1	CLASS	D	4	DLN	[REDACTED]
9	END	NONE			[REDACTED]
12	REST	NONE	3	DOB	[REDACTED]

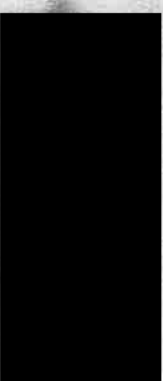
1 CULLUM  
 2 JACK HAROLD  
 8 1215 E TREASURE RD  
 PEARCE, AZ 856254004

4

4	EXP	10/28/2031	5	ISS	09/10/2022
15	SEX	M	14	EYES	GRN
16	HGT	5'-08"	13	HAIR	BRN
17	WGT	195 lb			

DONOR

6 DDD 028900006AC053705



30 JUN 1





# FINGERPRINT VERIFICATION FORM

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

**DLLC USE ONLY**

Job #:	247154
Date Accepted:	6/9/23
CSR:	OK

**ATTENTION FINGERPRINT TECHNICIAN:**

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.  
**Do not give the applicant the fingerprint card without first sealing it inside the envelope.**
5. **Write applicants name on front of sealed envelope.**

**PRINT** the following information:

<b>Date</b> 05/24/2023	<b>Name of Applicant:</b> Jack Harold Cullum	
<b>Name of Fingerprint Technician:</b> GREGORY BECKETT		
<b>Fingerprint technician's Signature:</b> <i>Gregory S Beckett</i>		
<b>Fingerprint technician's Agency/company Name:</b> AZ BIOMETRICS LLC		<b>Phone Number:</b> 510-395-9252
<b>Type of Photo ID Provided (check one):</b>		
<input checked="" type="checkbox"/> <b>Driver's License</b> <input type="checkbox"/> <b>Passport</b> <input type="checkbox"/> <b>Other (Please specify)</b>		



\*23 JUN 8 PM 12:01 AZDLLC \*23 MAY 30 PM 3:05 AZDLLC

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

Your fingerprints will be used to check the criminal history records of the FBI.

If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record. You should be afforded a reasonable amount of time of twenty one (21) days to correct or complete the record (or decline to do so) before officials deny you employment, license, or other benefit based on information in the criminal history record.

The procedures for obtaining a change, correction, or updating of your FBI criminal history record are set forth in Title 28, Code of Federal Regulations, Sections 16.30 through 16.34. Information on how to review and challenge your FBI criminal history record can be found at [www.fbi.gov](http://www.fbi.gov) under "Services" and then "Identity History Summary Checks" or by calling (304) 625-5590.

To obtain a copy of your Arizona criminal history in order to review/update/correct the record, you can contact the Arizona Department of Public Safety Criminal History Records Unit at (602) 223-2222 to obtain a fingerprint card and a Review and Challenge packet. Information on the review and challenge process can be found on the DPS website ([www.azdps.gov](http://www.azdps.gov)).

### Privacy Act Statement

*This privacy act statement is located on the back of the **FD-258 fingerprint card**.*

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/ biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints, may continue to be compared against other fingerprints submitted to, or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018



Certificate #644068

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

Certificate of Completion  
For  
Title 4 **BASIC** 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.

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

Jack Cullum

Full Name (please print)

*Jack Cullum*

Signature

04-12-2023

Training Completion Date

04-11-2026

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

**Professional Server Certification Corporation (PSCC)**

Company Name

P.O. Box 192, Madison, South Dakota 57042

Mailing Address

1- (800) 247-7737

Daytime Contact Phone Number

I, Robert Graham, 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).

*Robert Graham*

Instructor Signature

12 / 04 / 2023

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.

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

Jack Cullum

Full Name (please print)

Jack Cullum (handwritten signature)

Signature

04-14-2023

Training Completion Date

04-13-2026

Certificate Expiration Date
(three years from completion date)

Training Provider Information

Professional Server Certification Corporation (PSCC)

Company Name

P.O. Box 192, Madison, South Dakota 57042

Mailing Address

1- (800) 247-7737

Daytime Contact Phone Number

I, Robert Graham, 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).

Robert Graham (handwritten signature)

Instructor Signature

14 / 04 / 2023
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)

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