

#20-03

State of Arizona
Department of Liquor Licenses and Control

Created 03/10/2020 @ 04:46:16 PM

Local Governing Body Report

LICENSE

Number: 07140009 Type: 007 BEER AND WINE BAR
Name: CHICKEN
State: Pending
Issue Date: Expiration Date: 07/31/2020
Original Issue Date: 05/24/1985
Location: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Mailing Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (928)342-1294
Alt. Phone: (928)261-5070
Email: CHICKENONTHERUN@LIVE.COM

Currently, this license has pending applications.

AGENT

Name: RANDALL JAY GOULD
Gender: Male
Correspondence Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (928)261-5070
Alt. Phone:
Email: CHICKENONTHERUN@LIVE.COM

OWNER

Name: CHICKEN LLC
Contact Name: RANDALL JAY GOULD
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 1884583 State of Incorporation: AZ
Incorporation Date: 08/11/2018
Correspondence Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (928)261-5070
Alt. Phone:
Email: CHICKENONTHERUN@LIVE.COM

Officers / Stockholders



Name:
RANDALL JAY GOULD
HEATHER DAWN PASNOKOT

Title:
MEMBER
MANAGER-LLC

% Interest:
49.00
49.00

CHICKEN LLC - MEMBER

Name: RANDALL JAY GOULD
Gender: Male
Correspondence Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (928)261-5070
Alt. Phone:
Email: CHICKENONTHERUN@LIVE.COM

CHICKEN LLC - MANAGER-LLC

Name: HEATHER DAWN PASNOKOT
Gender: Female
Correspondence Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (314)332-6968
Alt. Phone:
Email: [REDACTED]

<h2>MANAGERS</h2>

Name: HEATHER DAWN PASNOKOT
Gender: Female
Correspondence Address: 12415 S FRONTAGE ROAD
YUMA, AZ 85367
USA
Phone: (314)332-6968
Alt. Phone:
Email: [REDACTED]

APPLICATION INFORMATION

Application Number: 102086
Application Type: Acquisition of Control / Agent Change (Abbey)
Created Date: 03/10/2020

QUESTIONS & ANSWERS

007 Beer and Wine Bar

- 4) Is the Business located within the incorporated limits of the city or town of which it is located?

No

Jerome

Rosa Cays

Deputy Town Clerk

Town of Jerome

600 Clark St

Jerome, Arizona 86331

Office: 928-634-7943

If no, in what City, Town, County or Tribal/Indian Community is this business located?

- 5) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?

No



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

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.

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#: 07140009 / 102086

1. Check the Appropriate Box →

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

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

4. Place of birth: Long Beach CA. USA Height: 5'4" Weight: [REDACTED] Eyes: BR. Hair: BLK
City State COUNTRY (not county)

5. Name of current/most recent spouse: Pasnokot Joseph Wesley Birth Date: [REDACTED]
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: 03/15/07

7. Daytime telephone number: 3143326968 E-mail address: [REDACTED]

8. Business Name: The Chicken Business Phone: 928 / 342 / 1294

9. Business Location Address: 12415 S. Frtg. Rd. Yuma AZ > 85367
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)
09/14	CURRENT	Restaurant	The Chicken, Randy Gould Yuma AZ. 85367

(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
09/15	CURRENT	[REDACTED]

(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

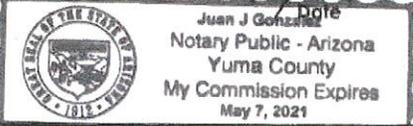
If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

NOTARY

I (Print Full Name) Heather Pasnikot 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: Heather Pasnikot State of Arizona County of Yuma
The foregoing instrument was acknowledged before me this

My Commission Expires on: May 7th 2021 28th Day of Jan. 2020
Day Month Year



[Signature]
Signature of Notary

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

PRINT NAME: Randall J. Gault SIGNATURE: [Signature]

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.

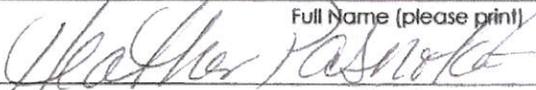
Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing 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

Heather D Pasnokot

Full Name (please print)



Signature

01/30/2020

Training Completion Date

01/30/2023

Certificate Expiration Date
(three years from completion date)

20 FEB 10 AM 1:14 AZDLLC

Training Provider Information

360training.com Inc.

Company Name

6801 N Capital of Texas Hwy, Bldg I, Suite 250, Austin, TX 78731

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, 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).



Instructor Signature

01/30/2020

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)
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.

20 FEB 6 PM 2:48 AZDLLC

Certificate # AZB-OFF-04948

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

Heather D Pasnokot

Full Name (please print)

Heather Pasnokot
Signature

12/13/2019

Training Completion Date

12/12/2022

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6801 N Capital of Texas Hwy, Bldg I, Suite 250, Austin, TX 78731

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

20 MAR 10 09:14 AM AZD

I, Samantha Montalbano, 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).

Instructor Signature

12/13/2019
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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Certificate # AZB-ON-24554

20 FEB 6 PM 2:48 AZD L L C

Certificate of Completion For

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

Title 4 **BASIC** Liquor Law Training

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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

Heather D Pasnokot

Full Name (please print)

Heather Pasnokot

Signature

12/15/2019

Training Completion Date

12/14/2022

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6801 N Capital of Texas Hwy, Bldg I, Suite 250, Austin, TX 78731

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

20 FEB 10 10:41 AM '14

I, Samantha Montalbano, 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).


Instructor signature

12/15/2019
Day Mo Year

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- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
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