| CSR:    |  |
|---------|--|
| Amount: |  |



2. Applicant's mailing address:

(Must be an Officer/Member of the Non Profit Entity) Last

3. Applicants home/cell phone: 602 402

1. Applicant:

## SPECIAL EVENT LICENSE **APPLICATION FEE \$25.00 PER DAY**

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

| DLLC USE ONLY  |
|----------------|
| Job #:         |
| Date Accepted: |
| CSR:           |
| License #:     |

SECTION 1 Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

\_ Applicant's business phone: \_

Freeman

| . Applicants email                  | address                  | CICCIIIVIII CV             | HULLI. CUTT               |                               |
|-------------------------------------|--------------------------|----------------------------|---------------------------|-------------------------------|
| 5. Special Event Nan                | ne: IHAAZ YYH            | 2 Hickey To                | urnament & B              | BQ                            |
| 6. Name of Non-Profit               | f Organization, Candidat | e or Political Party/Gov.: | Yuma Yout                 | n Hockey Lea                  |
| <sup>7</sup> . Non-Profit/IRS Tax E | xempt Number: 45         | 8-1258562                  |                           |                               |
| 3. Arizona Corporc                  | ation Commission File    | #: <u>10118110</u> fo      | out of State please spe   | ecify:                        |
| . Event Location Nar                | me: Kennedy              | Skate Rink                 | ∞                         | (Attach letter of good standi |
|                                     | ₹                        |                            | ane, Yuma,                | Arizona                       |
|                                     |                          | •                          | nd may not exceed 10 d    |                               |
|                                     | **SEPARATE APPLI         | CATION FOR EACH "          | NON-CONSECUTIVE           | 'DAY**                        |
| Days                                | Dale                     | Day of Week                | Event Start<br>Time AM/PM | License End<br>Time AM/PM     |
| DAY 1:                              | 3/15/24                  | Friday                     | 6pm - 10pm                | <u> 10pm - 10pm</u>           |
| DAY 2:                              | 3/10/24                  | Saturday                   | Ilam-10pm                 | 11am-10pm                     |
| DAY 3:                              | 3/17/24                  | Sunday                     | 11am - 10pm               | Ilam-10pm                     |
| DAY 4;                              |                          | <u></u>                    |                           |                               |
| DAY 5:                              |                          |                            |                           |                               |
| DAY 6:                              |                          |                            |                           |                               |
| DAY 7:                              |                          |                            |                           |                               |
| DAY 8:                              |                          |                            |                           |                               |
| DAY 9:                              |                          |                            |                           |                               |
| DAY10:                              |                          |                            |                           |                               |
| 07/70000                            |                          | Davis State                |                           |                               |

| SECTION 2 What type of security of (List type and number of po  | ind control r<br>blice/security p | neasures will you take<br>personnel and type of fend  | to prevent violat<br>cing or control barrie     | ions of liquor law<br>rs, if applicable.)      | rs at this event?                         |
|---|-----------------------------------|---|---|--|---|
| Number of Police  | 4                                 | Number of Sec   | urity Personnel                                 | encing   | <b>Barriers</b>                           |
| Must explain security measures: 10  | bands                             | will be given   | out to Ven                                      | hed purch                                      | asers.                                    |
| Customore Will Consum   | ne bever                          | asus in fence   | d off ram                                       | ada whe  | re  |
| Customers Will Cunsum  Section 3 What is the purpose of the   | VIII ACT<br>his event?            | as xeunty c   | ind monit                                       | er and in                                      | eck los.                                  |
| On-site consumption   | ☐Off-site                         | (auction/wine/distilled                               | l spirits pull)                                 | □Bo  | th  |
| How is this special event going to co<br>Check one of the following boxes. (R   |                                   | pensing, serving, and s                               | elling of spirituous                            | liquors?                                       |   |
| A) Special Event being held on a Body on page 3. (If checked r  |                                   |   | pproval and signo                               | ature by the Loca                              | al Governing                              |
| B) Will this event be held on a cur<br>(Must attach a letter from the li  | rently license<br>icensed prer    | ed premises and within<br>nises with an explanat      | the already apprion of the option of            | oved and license<br>hecked below)              | ed area?                                  |
| Name of Busine  | 255                               |   | License Number                                  | Phone (inc                                     | lude Area Code)                           |
| Place license in non-use - Special E  Must attach letter from the location  | vent License<br>n suspending      | e selling all alcohol without license for duration of | out retailer involver<br>i <b>special event</b> | ment   |   |
| Dispense and serve all spirituous lic<br>revenue from alcohol sales is donate   |                                   |   | ess operates normo                              | ally, minimum of 23                            | 5% of gross                               |
| Dispense and serve all spirituous lic<br>purchased or donated by the special<br>used during the special event. <b>Must</b>      | al event licen:                   | see. The retailers existing                           | alcohol inventory                               | must be separate                               | ed from any alcoho                        |
| Split premise between special ever<br>sales of alcohol. (These sales will be a<br>it must be in a separate area than the        | done in sepai                     | rate areas. If alcohol is c                           | lonated or purchas                              | and the retailer v<br>sed by the specia        | vill conduct<br>I event licensee          |
| Off Sale only - Wine/Distilled Spirits service of alcohol.  | Pull, Live or                     | <b>Silent Auctions</b> – Retaile                      | er will still be permit                         | ted to conduct al                              | l normal sale and                         |
| SECTION 4   |                                   |   |   |  |   |
| 1. Has the applicant been convicte  | ed of a felon                     | y, or had a liquor licer                              | nse revoked withi                               | n the last five (5)                            | years?                                    |
| Yes No If yes, attach letter of   | f explanation                     | ı <b>.</b>  |   |  |   |
| 2. How many special event days ho   | ave been issi                     | ued to this organizatio                               | n during the cale                               | ndar year?                                     | 0   |
| <ol> <li>Is the Organization using the service contractor who may purchase and responsible for the sales and service</li> </ol> | sell alcohol d                    | ecial Event Contractors behalf of the license         | or? (A licensee car<br>e. If no special eve     | n utilize the service<br>ent contractor is lis | s of a special ever<br>sted, the licensee |
| ☐ <b>Yes No</b> If yes, please provide  | the Name                          | of the Special Event (                                | Contractor:                                     |  |   |
| 4. Is the organization using the servi<br>(Licensees who hold a series 6, 7,  | ces of a seri<br>11, or 12 lice   | es 6, 7, 11, or 12 licens<br>ense are automaticall    | ee to manage th<br>y qualified to be            | e sale or service<br>the special ever          | of alcohol?<br>nt contractor)             |
| Yes No if yes, please provide   | e the Name                        | of Licensee:  | [   | icense #:                                      | · · · · · · · · · · · · · · · · · · ·     |
| 5. List the name of the Individual or   | Organizatio                       | In that will receive rev                              | enues, <b>MUST EQU</b> .                        | AL 100 PERCENT.                                |   |

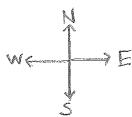
| ak e                          |  |   |   |   | RCVD - YUMA CITY                               |
|-------------------------------|--|---|---|---|--|
| lame:                         | Yunu                                   | Youth H                                 | ockey league  | Percentage: <i>100</i>                        | 6/0 25 JAN 2024 AM1                            |
| Address: _                    | PO BOX                                 | 403                                     | <u>Yuma</u>   | AZ  | 85366  |
| Name:                         | 2lieei                                 |   | City  | Percentage:                                   | Zip  |
| Address: _                    |  |   |   |   |  |
|                               | Street                                 |   | City  | State   | Zip  |
| Please re                     | - •                                    |   | ent license; rules and R19-1  |   |  |
| O ALCOH                       |  |   | SALES MUST BE FOR CONSI<br>A SPECIAL EVENT UNLESS THE   |   |  |
|                               |  |   | VENT LICENSE IS STACKED W   |   |  |
| ıthorized<br>your spe         | to sell, dispense                      | or serve alcohonsed premises. Pl        | ne licensed premises for yo<br>lic beverages under the pro<br>ease show dimensions, serv  | visions of your license.                      | Please attach a diagram                        |
|                               |  | ATT/                                    | ACH DIAC  | RAM   |  |
| Declara  I, (Print Nauthorize | tion:  Jame) Nove                      | <del>όα Γιεμά</del><br>application. The | droi. Please contact the local of the local | clare under penalty<br>application, and to th | of perjury that I am<br>e best of my knowledge |
| OCAL GO                       | VERNING BOD                            | Y                                       | enter de la companya  |   |  |
| Date Re                       | ceived: <u>01/2</u>                    | 5/2024                                  |   |   |  |
| ı, <u>Johr</u>                | n D. Simor<br>(Government Off          | ton                                     | Acting City Administrato  | recommend APPF                                | ROVAL 🗖 disapproval                            |
| On beho                       | alfof <u>City o</u><br>( <b>city</b> , | f Yuma<br>Town, County)                 | Signature   | , <u>02/23/20</u><br>Date                     | 2 <u>4 (928) 373 – 503</u> 5<br>Phone          |
| plication                     | s to be complet<br>cations to be su    | ed and submitted                        | nunicipality where the fair/f<br>d. Please check with local go<br>al licensing fees may also be   | overnment as to how fa                        | r in advance they require                      |
| □APP                          | roval 🗖 disaf                          | PPROVAL BY:                             |   | DATE:   |  |

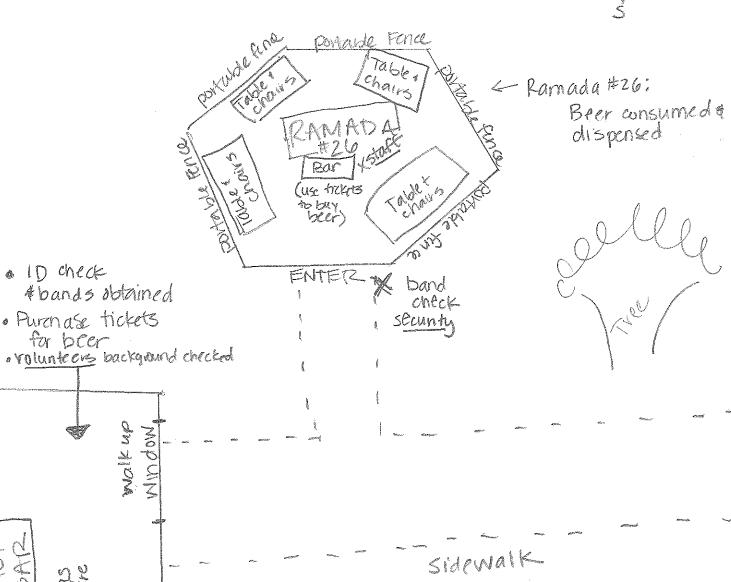
Yuma Youth Hockey League Special Event License Request

Location: Kennedy Hockey Rink Ramada # 26

23rd Street and Kennedy Lane

Dates: March 15 6-10pm and March 16 & 17, 12m-10pm Event: Yuma Youth Hockey League State Tournament





Kestvooms

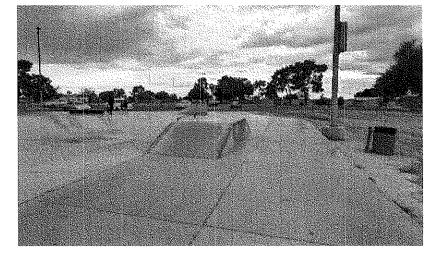
Yuma Youth Hockey League Speaded Event Liven's request march 15-17,2024, pown

Google Maps Kennedy Skate Park - Ramada # 26

RCU'D - YUMA CITY CLERK 25 JAN 2024 AH11:13



Map data @2024 , Map data @2024 20 ft



West Fast

Kennedy Skate Park

4.2 ★★★★ (136) Skateboard park

Overview

Reviews

About

## Yuma Youth Hockey League Special Event License Request

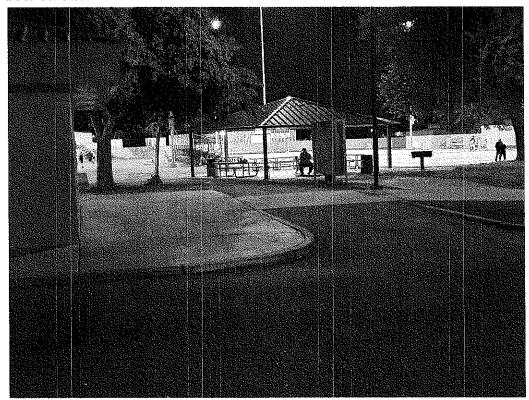
Location: Kennedy Hockey Rink & Ramada #26

23rd Street and Kennedy Lane

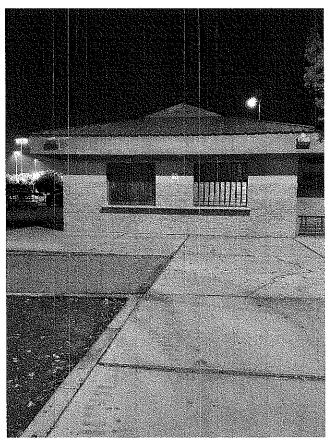
Dates: March 15 6-10 pm and March 16 & 17, 11:00 am-10 pm

Event: Yuma Youth Hockey League State Tournament

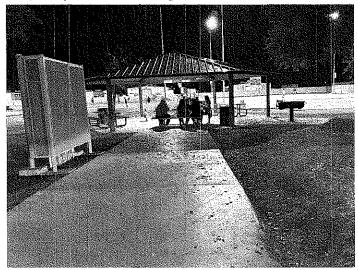
<u>Snack Bar</u> (where beer will be stored) with a locking door and only background cleared staff will be present. Where the ID bands will be applied after checking IDs. Where they can purchase beer tickets.



Snack Bar window on right will be the only window open to purchase beer tickets at, after age has been verified.



Ramada: Where beer will be dispensed and consumed. The ramada will be walled off with temporary barriers/fencing. There will be staff at the only entrance/exit verifying wristbands.



INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: MAR 24 2016

YUMA YOUTH HOCKEY INC PO BOX 403 YUMA, AZ 85366 Employer Identification Number: 48-1258562 DIN. 17053275318025 Contact Person: MRS. JOHNSON ID# 31287 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: June 30 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Yes Effective Date of Exemption: November 15, 2014 Contribution Deductibility: Yes Addendum Applies: No

## Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

Based on the information you submitted with your application, we approved your request for reinstatement under Revenue Procedure 2014-11. Your effective date of exemption, as listed at the top of this letter, is retroactive to your date of revocation.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar

## YUMA YOUTH HOCKEY INC

to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Jeffrey I. Cooper

Director, Exempt Organizations

Rulings and Agreements