

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

Created 10/25/2023 @ 11:52:49 AM

Local Governing Body Report

**LICENSE**

Number:		Type:	010 BEER AND WINE STORE
Name:	TURQUOISE WINE BAR PEORIA		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	9299 W OLIVE AVENUE # 101 PEORIA, AZ 85345 USA		
Mailing Address:	9299 W OLIVE AVENUE # 101 PEORIA, AZ 85345 USA		
Phone:	(428)766-5979		
Alt. Phone:			
Email:	JEN@TURQUOISEWINEBAR.COM		

**AGENT**

Name:	JENNIFER ANN KEMPER SINCONIS
Gender:	Female
Correspondence Address:	9299 W OLIVE AVENUE # 101 PEORIA, AZ 85345 USA
Phone:	(425)766-5979
Alt. Phone:	
Email:	JEN@TURQUOISEWINEBAR.COM

**OWNER**

Name: TURQUOISE WINE BAR PEORIA LLC  
Contact Name: JENNIFER ANN KEMPER SINCONIS  
Type: LIMITED LIABILITY COMPANY  
AZ CC File Number: 23589081 State of Incorporation: AZ  
Incorporation Date: 10/02/2023  
Correspondence Address: 9299 W OLIVE AVENUE  
# 101  
PEORIA, AZ 85345  
USA  
Phone: (425)766-5979  
Alt. Phone:  
Email: JEN@TURQUOISEWINEBAR.COM

**Officers / Stockholders**

Name:	Title:	% Interest:
LAURA JEAN HERNANDEZ	Manager-LLC	50.00
JENNIFER ANN KEMPER SINCONIS	Manager-LLC	50.00

**TURQUOISE WINE BAR PEORIA LLC - Manager-LLC**

Name: LAURA JEAN HERNANDEZ  
Gender: Female  
Correspondence Address: 9299 W OLIVE AVENUE  
# 101  
PEORIA, AZ 85345  
USA  
Phone: (602)418-0063  
Alt. Phone:  
Email: LAURA@TURQUOISEWINEBAR.COM

**TURQUOISE WINE BAR PEORIA LLC - Manager-LLC**

Name: JENNIFER ANN KEMPER SINCONIS  
Gender: Female  
Correspondence Address: 9299 W OLIVE AVENUE  
# 101  
PEORIA, AZ 85345  
USA  
Phone: (425)766-5979  
Alt. Phone:  
Email: JEN@TURQUOISEWINEBAR.COM

**MANAGERS**

Name: JENNIFER ANN KEMPER SINCONIS  
Gender: Female  
Correspondence Address: 9299 W OLIVE AVENUE  
# 101  
PEORIA, AZ 85345  
USA  
Phone: (425)766-5979  
Alt. Phone:  
Email: JEN@TURQUOISEWINEBAR.COM

\*\*\*\*\*

Name: LAURA JEAN HERNANDEZ  
Gender: Female  
Correspondence Address: 9299 W OLIVE AVENUE  
# 101  
PEORIA, AZ 85345  
USA  
Phone: (602)418-0063  
Alt. Phone:  
Email: LAURA@TURQUOISEWINEBAR.COM

## APPLICATION INFORMATION

Application Number: 262754  
Application Type: New Application  
Created Date: 10/12/2023

## QUESTIONS & ANSWERS

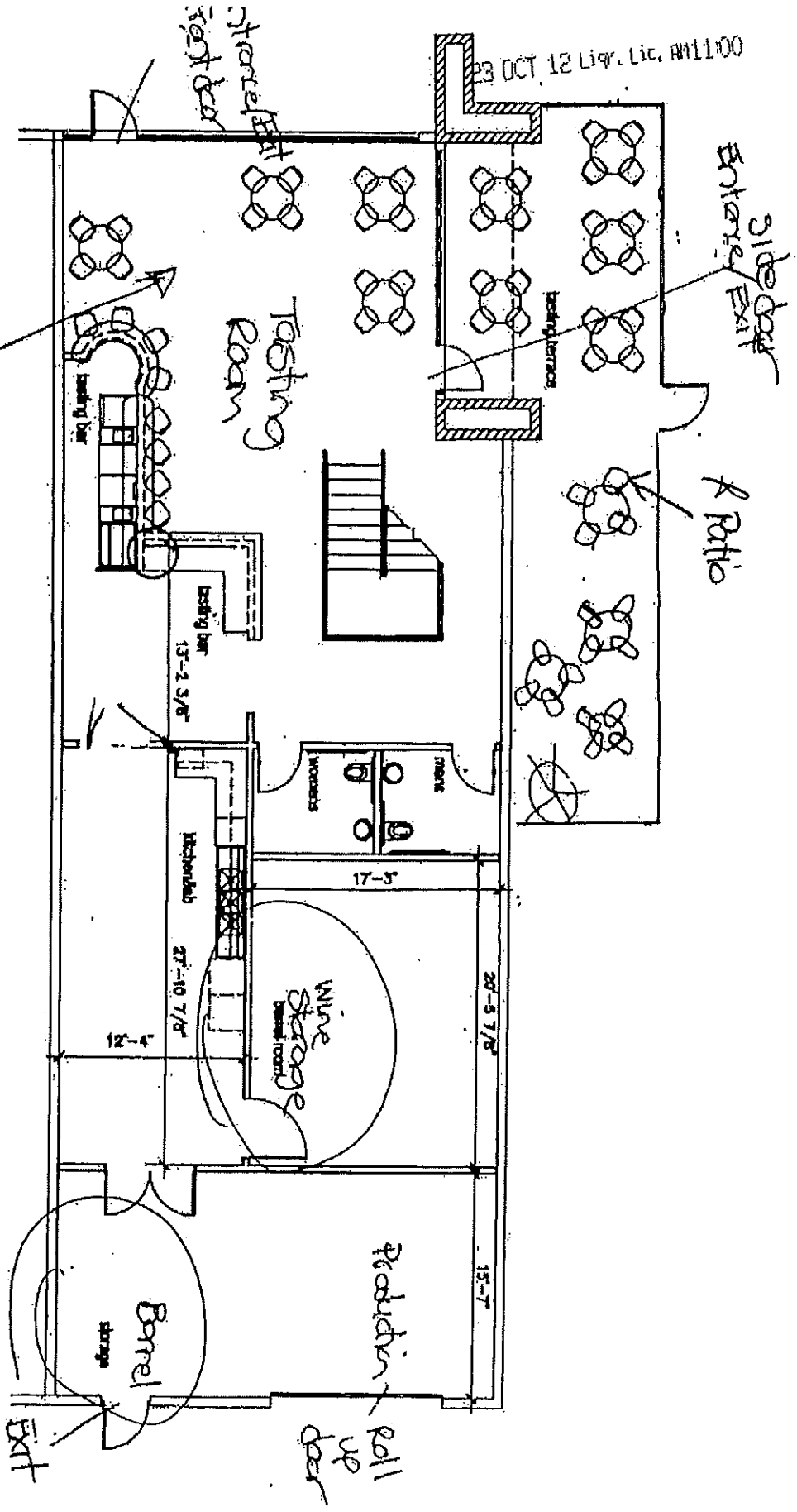
### 010 Beer and Wine Store

- 1) Are you applying for an Interim Permit (INP)?  
No
- 2) Provide name, address, and distance of nearest school.  
(If less than one (1) mile note footage)  
SUN VALLEY ELEMENTRAY - 5808 FT  
8361 N 95TH AVE PEORIA, AZ 85345
- 3) Are you one of the following? Please indicate below.  
Property Tenant  
Subtenant  
Property Owner  
Property Purchaser  
Property Management Company  
Property 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.  
CITY NATIONAL BANK (MIKE SHEPSTON)- \$639,000.00  
7878 N 16TH ST #350 PHOENIX, AZ 85020
- 7) Are there walk-up or drive-through windows on the premises?  
No
- 8) Does the establishment have a patio?  
Yes  
Is the patio contiguous or non-contiguous?  
CONTIGUOUS PATIO
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
No

### 10S Beer and Wine Store Sampling

- 1) Have you uploaded a sampling privileges form?  
Yes

001100 Lic. AM1100 OCT 12 2013



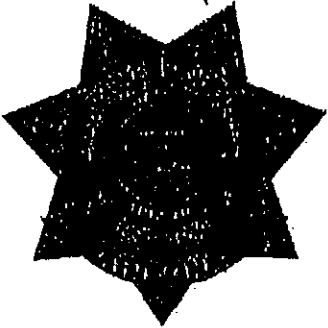
NEW FLOOR PLAN  
NO SCALE

3085 sq.

Above tasting room is a lift  
for seating & tasting

23 OCT 12 Lic. Lic. RM1100

CSR: OK  
Amount: \$1000



**SAMPLING PRIVILEGE APPLICATION SERIES 9 AND 10 ONLY**

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

**DLIC USE ONLY**

Job #:	<u>982 734</u>
Date Accepted:	<u>10/25/83</u>
<input type="checkbox"/> Liquor Store (series 9)	
<input checked="" type="checkbox"/> Beer and Wine Store (series 10)	
CSR:	

Type or Print with Black Ink

License #: Pending

Applicant's Name:  Agent  Sole Proprietor SINCONIS JENNIFER ANN Kemper  
Last First Middle

Premises Name: TURQUOISE WINE BAR PEORIA

Premises Address: 9299 W OLIVE AVE SUITE #101 PEORIA ARIZONA MARICOPA 85345  
Street Address City State County Zip Code

Mailing Address: 9299 W OLIVE AVE SUITE #101 PEORIA ARIZONA MARICOPA 85345  
Street Address City State County Zip Code

Business Phone #: PENDING Daytime Contact #: (425) 766-5978 Email Address: JEN@TURQUOISEWINEBAR.COM

**Series #10 Beer and Wine Store Only**

- I declare that my business qualifies as a
- Premises that is 5,000 square feet or larger
  - Premises that has at least 75% of shelf space dedicated to beer and wine

**SIGNATURE**

**Declaration:**  
I, (Print Name) JENNIFER ANN SINCONIS, declare under penalty of perjury that I am authorized to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

**LOCAL GOVERNING BOARD**

I, \_\_\_\_\_ recommend  APPROVAL  DISAPPROVAL  
(Government Official Signature) (Title)

on behalf of \_\_\_\_\_  
(City, Town, County) Phone Date

**DLIC USE ONLY**

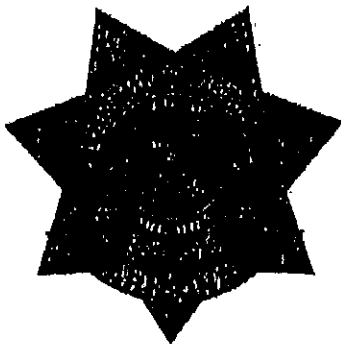
Investigation Recommendation:  Approval  Disapproval by: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Director Signature required for Disapprovals: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

LC:  
Amount:

23 OCT 12 Lic. Lic. AM11X00

*FP CURRENT*  
*3/2022*  
DLIC USE ONLY



**AGENT/CONTROLLING PERSON QUESTIONNAIRE**

Job #: *262754*  
Date Accepted: *10/24/03*  
CSR: [REDACTED]

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:

*FP Current*

**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: SINCONIS JENNIFER ANN *Kennec* Birth Date: [REDACTED] (NOT a public record)

3. Social Security: [REDACTED] Drivers License #: H67740580 State Issued: ARIZONA

4. Place of birth: [REDACTED] Height: [REDACTED] Weight: [REDACTED] Eyes: GREEN Hair: [REDACTED]

5. Name of current/most recent spouse: SINCONIS JUSTIN KELLY Birth Date: [REDACTED] (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes  No  If yes, what is your date of residency? JULY 2020

7. Daytime telephone number: 485-766-5979 **PENDING** Email address: JEN@TURQUOISEWINEBAR.COM

8. Premises Name: TURQUOISE WINE BAR PEORIA Business Phone: PEN DING

9. Premises Address: 9299 W OLIVE AVE SUITE #101 PEORIA ARIZONA MARICOPA 85345

10. List your employment or type of business during the past five (5) years. If ~~not~~ employed, retired, or student, list place of residence address. (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
02/2022	CURRENT	BEER AND WINE BAR OWNER	TURQUOISE WINE BAR 8160 W UNION HILLS DR #B201 GLENDALE AZ 85308
04/2018	02/2022	MARKETING MANAGER	PETSMART 19601 N 27TH AVE PHOENIX ARIZONA 85207

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
		[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

(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 DLLC 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) JENNIFER ANN SINCONIS 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: [REDACTED] Date: 10/09/2022

Certificate of Completion  
For  
Title 4 BASIC Liquor Law Training

<input type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input checked="" 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. Licenses sometimes require BASIC Title 4 Training as 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.

20 OCT 25 14:14:14 2013

Student Information

Jennifer Sinconis

08/26/2021

Training Completion Date

08/26/2024

Certificate Expiration Date  
(five years from completion date)

Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, BRETT PALMER, 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

26 / 08 / 2021

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

# 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

Jennifer Sinconis

08/26/2021

Training Completion Date

08/26/2024

Certificate Expiration Date  
(three years from completion date)

2024 OCT 25 11:47 AM

### Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, BRETT PALMER, 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).

[Redacted Signature]

Instructor Signature

26 / 08 / 2021

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)

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The questionnaire (which designates a manager to a license) and the agent change form (which designates a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all named persons have been submitted to the Department of Liquor

23 OCT 12 Lic. Lic. AM11:00



**ALIEN STATUS**

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

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) JENNIFER ANN SINCONIS

**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 EVERETT State WASHINGTON COUNTRY UNITED STATES

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

2) Name of document: ARIZONA DRIVER'S LICENSE

If you answered No, you must complete Sections III.

**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 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.

'23 OCT 12 Lic. Lic. AM1100

**SECTION III – QUALIFIED ALIEN DECLARATION**

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 certain benefits under the 8 U.S.C. §

JENNIFER ANN SINCONIS

Print Name

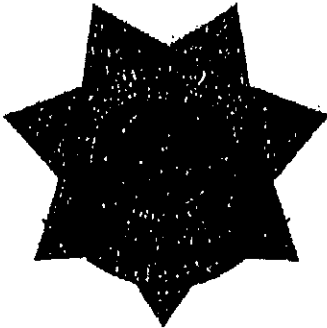


10/09/2023

Date

23 OCT 12 Lic. Lic. #M1100  
FD Current  
3/2022

LC:  
Amount:



# AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLIC USE ONLY  
Job #: 062754  
Date Accepted: 10/28/03  
CSR: [Redacted]

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

License Number: [Redacted]

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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: HERNANDEZ LAURA JEAN Birth Date: [Redacted]  
Last First Middle (NOT a public record)

3. Social Security #: [Redacted] License #: [Redacted] State Issued: [Redacted]

4. Place of birth: [Redacted] Height: [Redacted] Weight: [Redacted] Eyes: [Redacted] Hair: [Redacted]  
City State COUNTRY

5. Name of current/most recent spouse: HERNANDEZ DANIEL MANUEL 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? JUNE 1974

7. Daytime telephone number: 602-418-0063 Email address: LAURA@TURQUOISEWINEBAR.COM

8. Premises Name: TURQUOISE WINE BAR PEORIA Business Phone: PEN / DIN /

9. Premises Address: 9299 W OLIVE AVE SUITE #101 PEORIA ARIZONA MARICOPA 85345  
Street (do not use PO Box) City State County Zip

23 OCT 12 11:47 AM 1101

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	EMPLOYER'S NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
02/2022	CURRENT	BEER AND WINE BAR OWNER	TURQUOISE WINE BAR 8160 UNION HILLS DRIVE #B201 GLENDALE ARIZONA 85308
10/2021	02/2022	MARKET DIRECTOR	SUNRISE PRESCHOOL CORPORATE OFFICE 6053 VETERANS PKWY COLUMBUS GEORGIA 31009
10/2017	02/2022	REALTOR	WESTUSA REALTY 2355 W UTOPIA RD SUITE #100 PHOENIX AZ 85027

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

(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 DLLC 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) LAURA JEAN HERNANDEZ 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: [Redacted] Date: 10/09/2023

# 181442  
Turquoise  
Wine Bar

Certificate of Completion  
For  
Title 4 BASIC Liquor Law Training

On-sale  
 Off-sale  
 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. Licenses 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 five years after the training completion date.

23 OCT 25 11:41 AM '22

Student Information

Naura Hernandez



01/11/2022

01/11/2025

Training Completion Date

Certificate Expiration Date

(Three years from completion date)

Training Provider Information

ABC - Arizona Business Council for Alcohol Education

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

I, Jesus Altamirano, 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 certificate by A.A.C. R19-1-103(E) and (F).

[Redacted Signature]

Instructor Signature

11 / 1 / 2022

Day / Month / Year

Persons authorized to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business (A.A.C. R19-1-103(F)(1))  
2) business agent actively involved in the daily business operations of a liquor-licensed business (A.A.C. R19-1-103(F)(2))

- 1) Brewery (series 3)
- 2) Beer & Wine (series 5)
- 3) Beer & Wine Bar (series 7)
- 4) Beer & Wine Store (series 10)
- 5) Government (series 9)
- 6) Liquor Store (series 8)
- 7) Beer & Wine Bar (series 7)
- 8) Beer & Wine Store (series 10)

Persons not authorized to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) not actively involved in the daily business operations of a liquor-licensed business (A.A.C. R19-1-103(F)(1))  
2) business agent not actively involved in the daily business operations of a liquor-licensed business (A.A.C. R19-1-103(F)(2))

This certificate is the property of the Arizona Department of Liquor Licenses and Control. It is loaned to the individual named on this certificate. It is to be returned to the Department of Liquor Licenses and Control upon request.

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 coordinator.  
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 may be available through the training provider for two years after the training completion date.

Student Information

Laura Hernandez

[Redacted Student Information]

1-11-2022

1-11-2025

Training Completion Date

Certificate Expiration Date  
(Three years from completion date)

Training Provider Information

**ABC - Arizona Business Council for Alcohol Education**

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

Jesus Altamirano

Instructor Name (please print)

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

[Redacted Signature]

11 / 1 / 2022

Day Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1. owner(s) of, or directly involved in the day-to-day business operations of a liquor licensed business (series 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

- Government (series 3)
- Liquor Store (series 7)
- Private Club (series 4)
- Hotel/Motel/Restaurant (series 1)

Persons (initial and renewal) are not to update until void Certificate of Completion is received from the Department of Liquor.  
Persons (which designates a manager to a new business or a new agent to a new business) must complete until void Certificate of Completion is received from the Department of Liquor.

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