

"HUB OF THE SOUTHWEST"

465 1st Avenue
P.O. Box 970
Holbrook, AZ 86025

OUR MISSION


City of Holbrook Government exists to provide ethical and responsible local government.

AGENDA

Regular City Council Meeting
6:00 p.m. June 22, 2023

1. CALL TO ORDER:
2. ROLL CALL:
3. PLEDGE OF ALLEGIANCE/INVOCATION:
4. CONSENT AGENDA:
June 8, 2023, meeting minutes. Tab 1
5. CALL TO THE PUBLIC FOR NON-AGENDA ITEMS:
*Three-minute time limit per individual.
6. CALL TO THE PUBLIC FOR AGENDA ITEMS:
*Five-minute time limit per individual.
7. NEW BUSINESS (DISCUSSION AND POSSIBLE ACTION):
 - a. A new application for a Liquor License for the Cameleon Café,
2102 Navajo Blvd., Holbrook, AZ, 86025. Tab 2
 - b. Public Hearing: Fiscal Year 2024 Primary Tax Levy.
 - c. Ordinance 23-03 - 1st Reading: An ordinance levying a primary property tax
upon the assessed valuation of property located within the City subject to
taxation, for the Fiscal Year ending June 30, 2024. Tab 3
 - d. Public Hearing: Fiscal Year 2024 Final Budget. Tab 4
 - e. Resolution 23-04: A resolution adopting the Fiscal Year 2024 Final Budget. Tab 4
 - f. Charter Review Committee selection - Mayor Smith. Tab 5
8. SUMMARY OF CURRENT EVENTS:
Mayor:
Council Members:
City Manager:
9. **SUBMISSION OF WRITTEN PETITION FOR ITEMS NOT ON THE AGENDA:
10. Swear in new Councilmember - Lisa Hunt.
11. ADJOURNMENT

Posted the 19th day of June 2023.



Lisa Hunt, City Clerk

*Individuals must submit a "Request to Address City Council" form to the City Clerk prior to the start of the meeting.

Anyone may address the City Council on any issue within the jurisdiction of the Council. City Council may generally not discuss items that are not specifically identified on the agenda, except in certain circumstances. Therefore, pursuant to A.R.S. § 38-431.01 (H), action taken as a result of public comment will be limited to directing City staff to study the matter, responding to any criticism, or scheduling the matter for further consideration and decision at a later date. Items on the agenda will not be heard or discussed in Call to the Public. Video or audio tapes or other overhead visual aids may not be presented during these public appearances. All speakers should begin their remarks by stating their name and address for the record.

**Any citizen of the City may appear before the Council at any regular meeting and present a written petition. Such petitions shall be considered, and response given within 31 days in conformity with the requirements of the Charter, the Open Meeting Law, and other statutory and constitutional provisions per Holbrook City Charter Article II, Section 2.18.

Unauthorized remarks from the audience, clapping, stomping of feet, yelling or any similar demonstrations are also prohibited. Violations of these rules may result in removal from the meeting. Individual members of the public body may respond to comments made by others who have addressed the public body.

The Holbrook City Council may discuss or take legal action on any item listed on the Agenda.

Pursuant to ARS 38-431.02, notice is hereby given to the Holbrook City Council, and to the General public that a meeting, which is open to the public, will be held on above-mentioned date, in the City Council Chambers, at 465 First Avenue, Holbrook, Arizona. Members of the City Council may choose to participate in this meeting telephonically. The City Council may adjourn into executive session, which will not be open to the public, to discuss any matter listed on the agenda in accordance with A.R.S. 38-431.03. The Holbrook City Council may vote to hold an executive session for the purpose of obtaining legal advice from the Council's attorney on any matter listed on the agenda pursuant to A.R.S. § 38-431.03(A)(3).

Electronic versions of this agenda can be found at www.holbrookaz.gov.

MINUTES OF THE REGULAR MEETING
OF THE HOLBROOK CITY COUNCIL HELD ON
June 8, 2023

CALL TO ORDER: Mayor Smith called the meeting to order at 6:00 p.m.

ROLL CALL: Mayor Kathleen Smith, Councilmembers Robert Black, Tim Dixon, Mike Nilsson, Karina Pack, and Arcenia Pacheco appeared in Council Chambers.

CITY STAFF: City Manager Ted Soltis and City Clerk Lisa Hunt.

PLEDGE OF ALLEGIANCE/INVOCATION: The Pledge of Allegiance was led by Councilmember Pack. The Invocation was given by Councilmember Nilsson.

CONSENT AGENDA:

May 25, 2023, Regular Meeting minutes.

May 25, 2023, Work Session minutes.

MOTION: Councilmember Dixon

SECONDED: Councilmember Nilsson

MOTION CARRIED

CALL TO THE PUBLIC FOR NON-AGENDA ITEMS: Mark Romo said he had viewed a previous Council Meeting and asked the Council to put their differences aside and come together as a group.

CALL TO THE PUBLIC FOR AGENDA ITEMS: Mark Romo recommended Teri Tafoya for the City Councilmember position and shared that she is a long-standing community member.

Francie Payne encouraged the Council to make an appointment for the vacant Council position. She discouraged the Council from going to an election, as it is an unnecessary expense.

Gerald Hancock talked about painting the cemetery wall, fixing the roads, and the fence at the marijuana plant. He told the Council that they need to step up. He also recommended Teri Tafoya for the vacant Council position.

NEW BUSINESS:

- a. Resolution 23-01: A resolution designating the Chief Fiscal Officer (CFO) for the purpose of submitting the Annual Expenditure Limitation Report (AELR). Mayor Smith read Resolution 23-01 in its entirety.

MOTION: Councilmember Nilsson

SECONDED: Councilmember Dixon

ROLL CALL VOTE: Councilmember Black "Aye", Councilmember Dixon "Aye", Councilmember Nilsson "Aye", Councilmember Pacheco "Aye", Councilmember Pack "Aye", Mayor Smith "Aye".

MOTION CARRIED

- b. Resolution 23-02: A resolution adopting the Fiscal Year 2024 Tentative Budget. Mayor Smith read Resolution 23-02 in its entirety. City Manager Soltis pointed out an error - 2023 should read 2024.

MOTION: Councilmember Dixon

SECONDED: Councilmember Pack

Discussion was held.

ROLL CALL VOTE: Councilmember Black "Aye", Councilmember Dixon "Aye", Councilmember Nilsson "Aye", Councilmember Pacheco "Aye", Councilmember Pack "Aye", Mayor Smith "Aye".

MOTION CARRIED

- c. Resolution 23-03: A resolution approving an Intergovernmental Agreement with Navajo County for Animal Impound Services. Mayor Smith read Resolution 23-03 in its entirety. City Manager Soltis reviewed the agreement. Councilmember Dixon requested that a typo in Section II, 5 be corrected from "statue" to "statute."

MOTION: Councilmember Black

SECONDED: Councilmember Dixon

ROLL CALL VOTE: Councilmember Black "Aye", Councilmember Dixon "Aye", Councilmember Nilsson "Aye", Councilmember Pacheco "Aye", Councilmember Pack "Aye", Mayor Smith "Aye"

MOTION CARRIED

- d. Interview applicants and select council member: Three applicants were interviewed: Adam Marsh, Teri Tafoya, and Tamera Church.

VOTES CAST: Councilmember Black-Teri Tafoya, Councilmember Dixon-Adam Marsh, Councilmember Nilsson-Adam Marsh, Councilmember Pacheco-Tamera Church, Councilmember Pack-Teri Tafoya, Mayor Smith-Teri Tafoya.

RESULTS: Teri Tafoya was elected as Councilmember.

SUMMARY OF CURRENT EVENTS-MAYOR:

-Mayor Smith shared that we have lost quite a few people this week and she wanted to send condolences to the Connie McPherson family, the family of Josh Harvey, the Grace Pooley Browning family and to the family of Patricia DeSpain.

Mayor Smith shared that Old West Fest is this weekend at the Navajo County Fair Grounds. It will kick off with an art show, and food trucks on June 9th 6-9 pm, and a roping competition starting at 4pm. The Bucket of Blood Race begins at 5:30 am (sign in). The Main Event begins June 10th at 9am. There will be competitions you can enter. You can take on Councilwoman Pacheco in the 3rd annual chili challenge, enter the horseshoe tournament, or show up to sign up for the pie eating contest. There will be vendors, art shows, entertainment, a rodeo and more. Volunteers are still needed.

SUMMARY OF CURRENT EVENTS-COUNCILMEMBERS:

-Councilmember Dixon gave condolences to the families who lost loved ones.

-Councilmember Nilsson also gave condolences to the families who lost loved ones.

-Councilmember Pacheco thanked those who ran for city council.

-Councilmember Black expressed concerns with cardboard recycling and with the fence at the marijuana facility on the west end of town.

-Councilmember Pack also gave condolences to the families who lost their loved ones.

SUMMARY OF CURRENT EVENTS-CITY MANAGER:

-City Manager Soltis attended the NACOG Economic Development Council meeting. He shared that a variety of topics were discussed including Broadband, Building Resilient Economies in Coal Communities (BRECC), and they heard a presentation from the Arizona Lodging and Tourism Association.

-He noted that registration for the 2023 League of Arizona Cities and Towns Annual Conference is now open. The conference is from August 29th to September 1st. It will be held at the JW Marriot Starr Pass Resort located in Tucson. If you plan on going, please contact the City Clerk ASAP so that she can make arrangements.

-He added that two historians from Yuma were checking on our cemetery. They told staff that this is the nicest, cleanest cemetery in the area. Thank you staff for your hard work at the cemetery.

-Finally, he added that Arizona Department of Transportation advises drivers to plan for lane restrictions along Interstate 40 between Joseph City and Holbrook beginning the week of June 12 through to August

SUBMISSION OF WRITTEN PETITION FOR ITEMS NOT ON THE AGENDA: None

Executive Session: On a public majority vote of the members constituting a quorum, the City Council will hold an executive session pursuant to A.R.S. 38-431.03(A)(3) for the purpose of discussion and consultation for legal advice with the City Attorney regarding charter requirements for elections.

MOTION: Councilmember Black

SECONDED: Councilmember Pack

5- "Ayes", 1- "Nay" by Councilmember Dixon

The Executive session was called at 7:00 p.m.

ADJOURNMENT:

MOTION: Councilmember Black

SECONDED: Councilmember Dixon

MOTION CARRIED

Meeting adjourned at 7:40 p.m.

I hereby certify that the forgoing minutes are a true and correct copy of the minutes of the Regular Meeting of the Holbrook City Council held on June 8, 2023. I further certify that the meeting was duly called and held and that a quorum was present.

Lisa Hunt, City Clerk

PASSED, APPROVED AND ADOPTED this 22nd day of June 2023.

Kathleen Smith, Mayor

State of Arizona
Department of Liquor Licenses and Control

Created 05/22/2023 @ 10:25:19 AM

Local Governing Body Report

LICENSE

Number:		Type:	012 RESTAURANT
Name:	CAMELEON CAFE		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	2102 NAVAJO BOULEVARD HOLBROOK, AZ 86025 USA		
Mailing Address:	PO BOX 6252 CHANDLER, AZ 85246 USA		
Phone:	(480)664-0389		
Alt. Phone:	(928)524-2446		
Email:	JREPINSKI22@YAHOO.COM		

AGENT

Name:	JARED MICHAEL REPINSKI
Gender:	Male
Correspondence Address:	PO BOX 6252 CHANDLER, AZ 85246 USA
Phone:	(480)664-0389
Alt. Phone:	
Email:	JREPINSKI22@YAHOO.COM

OWNER

Name:	CAMELEON CAFE LLC		
Contact Name:	JARED MICHAEL REPINSKI		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:		State of Incorporation:	
Incorporation Date:			
Correspondence Address:	PO BOX 6252 CHANDLER, AZ 85246 USA		
Phone:	(480)664-0389		
Alt. Phone:			
Email:	JREPINSKI22@YAHOO.COM		

Officers / Stockholders

Name:	Title:	% Interest:
TOMAS C HERNANDEZ	MEMBER	60.00
OSCAR G HERNANDEZ	MEMBER	40.00

CAMELEON CAFE LLC - MEMBER

Name: OSCAR G HERNANDEZ
Gender: Male
Correspondence Address: PO BOX 6252
CHANDLER, AZ 85246
USA
Phone: (928)241-2598
Alt. Phone:
Email: OGHERNANDEZ27@ICLOUD.COM

CAMELEON CAFE LLC - MEMBER

Name: TOMAS C HERNANDEZ
Gender: Male
Correspondence Address: PO BOX 6252
CHANDLER, AZ 85246
USA
Phone: (928)241-1031
Alt. Phone:
Email: THOMASH333@GMAIL.COM

APPLICATION INFORMATION

Application Number: 246213
Application Type: New Application
Created Date: 05/15/2023

Chavez

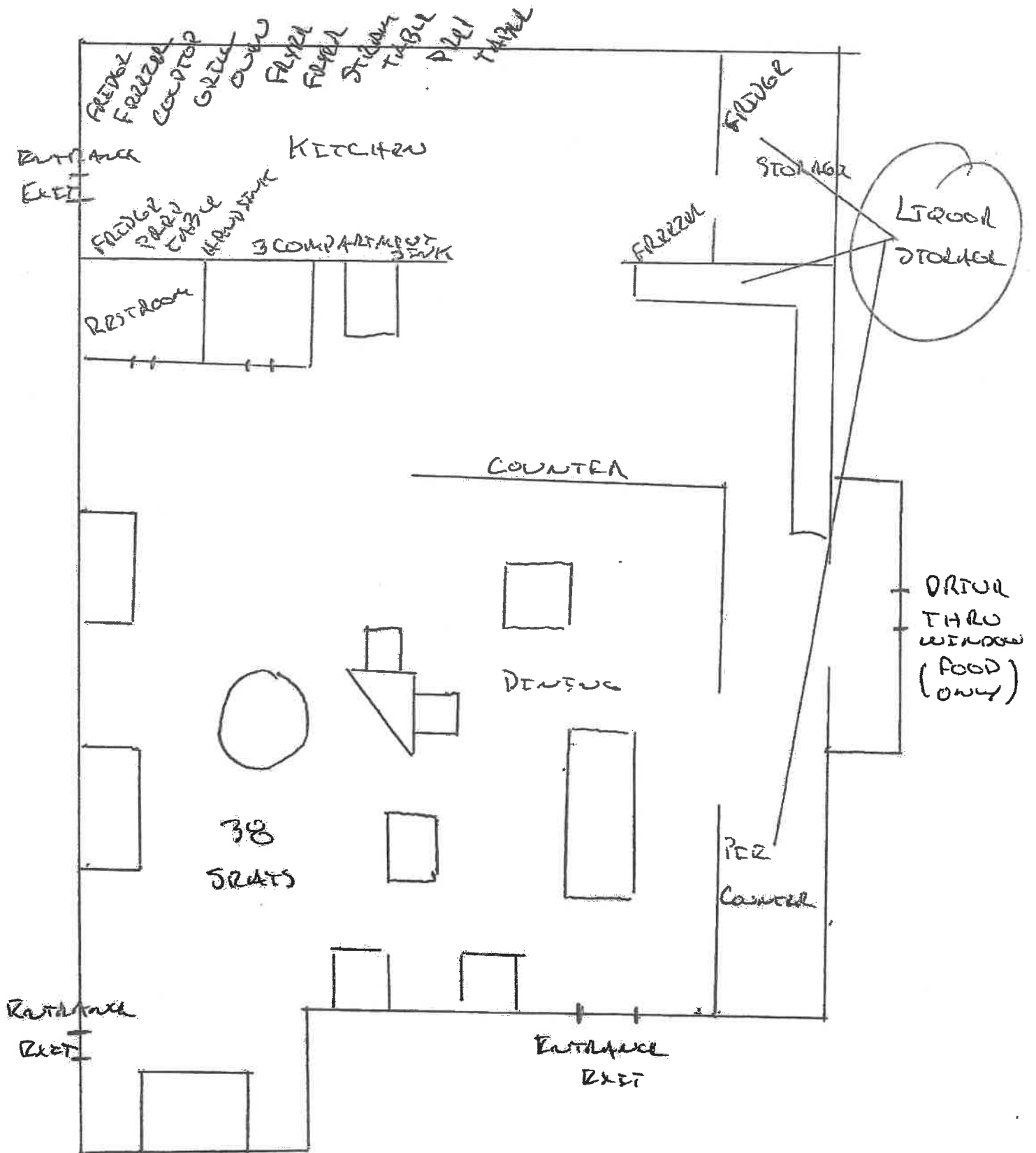
QUESTIONS & ANSWERS

012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
TENANT
- 3) Is there a penalty if lease is not fulfilled?
No
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 5) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
0
- 6) Are there walk-up or drive-through windows on the premises?
No
- 7) Does the establishment have a patio?
No
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No
- 9) What type of business will this license be used for?
MEXICAN/AMERICAN CAFE STYLE RESTAURANT



MAY 12 PM 2:00 AZD LLC
2,300 Sq FT





RESTAURANT/HOTEL/MOTEL OPERATION PLAN

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**

1. Name of restaurant (Please print): Cameleon Cafe

2. Must indicate the equipment below by Make, Model, and Capacity:

LIST ONLY THE FOLLOWING - NO ATTACHMENTS

Grill	CPG 1.5x4 Flattop Grill
Oven	CPG Double Oven
Freezer	True Single Door Freezer, Reach In Freezer
Refrigerator	Blue Air Double Glass Door Cooler, Del Field Coldtop, True Single Door Fridge
Sink	Hand Sink
Dish Washing Facilities	3 Compartment Sink
Food Preparation Counter (Dimensions)	2x4, 2x12, 2x6 Stainless Steel Prep Tables
Other	4 Pan Steamtable, 2 Fryers, Slicer, 2 Microwave Ovens, Waffle Iron, Toaster

3. Attach a copy of your FULL menu with pricing **INCLUDING NON-ALCOHOLIC BEVERAGES**

4. What percentage of your public premises is used primarily for restaurant dining?

(Do not include kitchen, bar, hi-top tables, or game area.) 90 %

5. Does your restaurant have a bar area that is distinct and separate from the dining area? YES No

(If yes, what percentage of the public floor space does this area cover?) _____ %

6. List the **seating capacity** for:

a) Restaurant dining area of your premises: [38]

(DO NOT INCLUDE PATIO SEATING)

b) Bar area [+ 0]

TOTAL [= 38]

7. What type of dinnerware is primarily used in your restaurant? Reusable Disposable Both

8. Does your restaurant contain any **games, televisions, or any other entertainment**? YES No

If yes, specify what types and how many (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

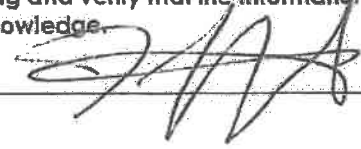
2 TV's

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

10. List number of employees for each position:

Position	How many
Cooks	6
Barenders	0
Hostesses	0
Managers	0
Servers	8
Other (Owner/Operators)	2
Other (Dishwashers)	2
Other ()	

I, (Print Full Name) Jared Michael Repinski, 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.

Applicant Signature: 



**RECORDS REQUIRED
FOR AUDIT
RESTAURANT/HOTEL/MOTEL**

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

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

Cameleon Cafe

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

3 MAY 12 PM 2:00 AZD LLC

13. Payroll Records

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages

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

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

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

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

A.R.S. §4-210(A)7

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

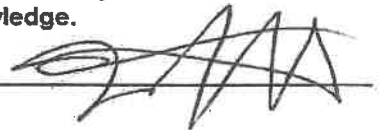
A.R.S. §4-205.02(G)

For the purpose of this section:

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

I, (Print Full Name) Jared Michael Repinski, 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.

Applicant Signature: _____



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

WELCOME TO THE CAMALEON RESTAURANT

BREAKFAST

Quick Breakfast & Mexican Breakfast include (2) eggs any style, choice of hash browns or home fries & choice of pancakes, biscuit & gravy or toast

QUICK BREAKFAST

(2) EGG BREAKFAST
(2) eggs any style 7.49

BACON & EGGS
(4) strips of
bacon 10.99

**CORN BEEF
HASH & EGGS**
(2) eggs any style 10.99

HAM & EGGS
A strip of ham 10.49

SAUSAGE & EGGS
(2) sausage patties or
(4) sausage links 10.99

BEEF PATTY & EGGS
(2) eggs any style 10.49

MEXICAN BREAKFAST

CHORIZO & EGGS
Spicy sausage, scrambled
eggs, refried beans & flour or
corn tortillas 10.49

HUEVOS RANCHEROS
(2) eggs any style, refried
beans, flour or corn tortillas
& red or green chili 9.99

BREAKFAST BURRITO
Choice of sausage, ham,
bacon or chorizo 10.49

CARNE ASADA & EGGS
(2) eggs any style, red or
green chili & corn or flour
tortillas 11.99

BIG BREAKFAST

All Big Breakfasts include (3) eggs any style, choice of hash browns or home fries & choice of toast, pancakes or biscuits & gravy

PORK CHOPS & EGGS
(2) pork chops & (3) eggs any style 12.99

HAMBURGER STEAK & EGGS
2x1 hamburger steak & (3) eggs any style 11.99

SIRLOIN STEAK & EGGS
8oz. steak & (3) eggs any style 13.99

HAM & EGGS
7oz. ham & (3) eggs any style 11.99

C.F.S. & EGGS
2x1 chicken fried steak & (3) eggs any style 11.99

SPECIAL OMELETS

CHEESE
(3) fluffy eggs &
cheese 10.29

VEGETARIAN
(3) fluffy eggs, mushrooms,
bell peppers, onions,
tomatoes & cheese 10.49

MUSHROOM & CHEESE
(3) fluffy eggs, mushrooms &
cheese 10.49


HAM & CHEESE
(3) fluffy eggs, ham &
cheese 10.49

SAUSAGE & CHEESE
(3) fluffy eggs, sausage &
cheese 10.49

DENVER
(3) fluffy eggs, ham, onions &
bell pepper 11.99

BACON & CHEESE
(3) fluffy eggs, bacon &
cheese 7.99

B.S.H. & CHEESE
(3) fluffy eggs, bacon,
sausage, ham &
cheese 11.99

 HOUSE FAVORITE

Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness.

PANCAKES

(1) PANCAKE 2.99

(2) PANCAKE 5.49

(3) PANCAKE 7.49

WAFFLES

WAFFLE 5.99

 STRAWBERRY WAFFLE 7.49

FRENCH TOAST

(1) FRENCH TOAST 2.99

(2) FRENCH TOAST 5.49

 (3) FRENCH TOAST 7.49


BISCUITS + GRAVY

(1) BISCUITS & GRAVY 3.29

(2) BISCUITS & GRAVY 5.49

(3) BISCUITS & GRAVY 6.99



 HOUSE FAVORITE

A LA CARTE

(1) EGG 1.99

SAUSAGE PATTIES 4.25

SAUSAGE LINKS 4.25

BACON 4.25

HAM 4.25

CHORIZO 2.99

HASH BROWNS 3.49

HOME FRIES 2.29

CUP OF OATMEAL 3.49

BOWL OF OATMEAL 4.25

TOAST 2.29

BEVERAGES

DRINKS 3.29

PEPSI

DIET PEPSI

SIERRA MIST

MT. DEW

RASPBERRY TEA

ICED TEA (UNSWEETENED)

PINK LEMONADE

HOT TEA

COFFEE / DECAF

MILK / HOT CHOCOLATE
OR COCOA

JUICES 3.29

ORANGE JUICE

APPLE JUICE

CRANBERRY JUICE

TOMATO JUICE

V8 JUICE

STRAWBERRY FRUIT SHOOT

GRAPEFRUIT SHOOT

SHAKES 5.99

CHOCOLATE | VANILLA

STRAWBERRY | PINEAPPLE

DESSERTS

APPLE PIE 5.49

A LA MODE 6.49

BLUEBERRY PIE 5.49

CHERRY PIE 5.49

Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness.

LUNCH

Add a side for 1.99 coleslaw, French fries, onion rings or later tots

BURGERS

HAMBURGER

Lettuce, tomato, onion & includes (1) side and a pickle 9.49

CHEESEBURGER

Cheese, lettuce, tomato, onion Includes (1) side and a pickle 9.99

BACON CHEESEBURGER

Cheese, bacon, lettuce, tomato includes (1) side and a pickle 11.29

MUSHROOM CHEESEBURGER

Swiss cheese, mushrooms, lettuce, tomatoes includes (1) side and a pickle 11.29

GUACAMOLE CHEESEBURGER

Swiss cheese, guacamole, lettuce, tomato & includes (1) side and a pickle 11.29

OPEN FACE CHILI BURGER

Melted cheese & a choice of homemade red, green, or chili beans includes (1) side 11.29

GREEN CHILI STRIP BURGER

Cheese, green chili strip, lettuce, tomato includes (1) side and a pickle 10.49

SOURDOUGH BURGER

Swiss cheese, grilled onions, lettuce, tomato & a pickle 10.49

PATTY MELT

Swiss cheese & grilled onions on a rye toast & a pickle 10.49

BACON CLUB

Triple decker bacon, American cheese, lettuce, tomatoes, turkey & a pickle 10.99

PHILLY CHEESE STEAK

French roll, grilled onions & peppers, roast beef, Swiss cheese & a pickle 10.49

SOUP

CUP 3.49 | BOWL 4.99

SANDWICHES

MUSHROOM

CHICKEN SANDWICH

Swiss, mushrooms, lettuce, tomatoes & a pickle 8.49

GUACAMOLE CHICKEN SANDWICH

Swiss, guacamole, lettuce, tomatoes & a pickle 8.49

BACON & CHICKEN SANDWICH

American cheese, bacon, lettuce, tomatoes & a pickle 8.49

GRILLED CHEESE

White toast, cheese, & a pickle 6.99

GRILLED HAM & CHEESE

White toast, cheese, ham, & a pickle 8.49

BLT

White toast, mayo, bacon, lettuce, tomato & a pickle 9.49

HOT HAM & SWISS

French roll, ham, Swiss cheese & a pickle 9.99

TUNA MELT

Sourdough toast, grilled tuna & a pickle 9.49

HOT BEEF SANDWICH

White toast, roast beef, brown gravy & mashed potatoes includes (1) side 10.49

BBQ BEEF SANDWICH

Hamburger bun, BBQ beef & a pickle 10.49

FRESH SALADS

FRESH ICEBERG LETTUCE

CHEF SALAD 10.49

GRILLED CHICKEN SALAD 10.49

SIDE SALAD 3.99

CRISPY CHICKEN 10.49

TACO SALAD 10.49

RED OR GREEN CHILI FRIES 4.99

Add ground beef, shredded beef or chicken for 3.99



HOUSE FAVORITE

Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness.

DINNER

Dinner Includes your choice of potatoes, green beans or corn & a soup or salad with dinner rolls on the side

BURGERS

CHICKEN BREAST
10.49

6 OZ. ROAST BEEF
11.99

BROCCOLI & CHEESE CHICKEN 11.99

2X1 HAMBURGER STEAK
With grilled onions 11.99

2X1 CHICKEN FRIED STEAK 11.99

LEMON PEPPER CHICKEN 11.99

MUSHROOM CHICKEN 11.99

(2) PORK CHOPS 12.99

LIVER & ONIONS
Served with bacon on top 10.49

(6) SHRIM DINNER 11.99

FRIED CHICKEN 13.99

10OZ. RIBEYE STEAK 24.95

8 OZ. SIRLOIN STEAK 15.49

8 OZ. STEAK & (4) SHRIMP 17.99

CARNE ASADA
With red or green chill, recommended side is rice & beans with a flour tortilla 14.49

BEVERAGES

SOFT DRINKS
3.29 free refill

PEPSI

DIET PEPSI

SIERRA MIST

MT. DEW

RASPBERRY TEA

DR. PEPPER

OTHER
3.29 free refill

ICED TEA

PINK LEMONADE

HOT TEA

COFFEE / DECAF

MILK

HOT CHOCOLATE OR COCOA

RED OR GREEN CHILI FRIES
Ground beef, shredded beef or chicken 4.99

MEXICAN FOOD

QUESADILLA
Cheese 7.49 | Chicken or shredded beef 10.49

CHIMICHANGA
Shredded beef or chicken & red or green chili 10.99

NACHOS
Half 7.49 | Full 10.49

(1) CHILI RELLENO
With rice & beans 8.99

(2) CHILI RELLENOS
With rice & beans 11.49

(3) TACOS
Ground beef, shredded beef or chicken 10.99

ENCHILADAS
Cheese 7.49
Ground or shredded beef 10.99 | Chicken 10.49

#1 TACO COMBO
1 each chicken, shredded beef, ground beef 9.99

#2 MEXICAN COMBO
Chili relleno, tamale and enchilada 11.99

#3 CHIMICHANGA, TACO, TAMALE 12.99

#4 BURRITO, TAMALE, TOSTADA 11.99

A LA CARTE

CHIPS & SALSA 4.25
Refill 3.00

CUP OF GREEN CHILI 2.99

CUP OF RED CHILI 2.99

CHEESE CRISPS 6.49

(1) CHILI RELLENO 5.49

(1) TACO 2.99

(1) ENCHILADA 2.99

(1) TOSTADA 2.99

CHILI BEANS & CORN MUFFIN
Cup 4.99 Bowl 6.49

CORN MUFFIN 1.79


BASKETS

(4) CHICKEN STRIPS 9.99

(6) SHRIMP BASKET 10.49

(3) FISH BASKET 11.49

(6) COMBO BASKET
(2) chicken strips, (2) shrimp & (2) fish strips 11.99

 HOUSE FAVORITE

Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness.

LC:
Amount:



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 246213
Date Accepted: 5-12-2023
CST: Chay

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

FP current
5-27-2023

License Number:

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: Repinski Jared Michael Birth Date: [REDACTED]
First Middle (NOT a public record)

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

4. Place of birth: Flint MI USA Height: 509 Weight: 200 Eyes: Brown Hair: Brown
City State COUNTRY

5. Name of current/most recent spouse: Hurley Perry Antonia Joan 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? August 1998

7. Daytime telephone number: 480-664-0389 Email address: jrepinski22@yahoo.com

8. Premises Name: Cameleon Cafe Business Phone: 928 / 524 / 2446

9. Premises Address: 2102 Navajo Blvd Holbrook AZ Navajo 86025
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 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)
8-2006	CURRENT	Member	AATF - P.O. Box 6252 Chandler AZ 85246

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

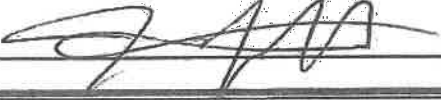
FROM Month/Year	To Month/Year	Street	City	State	Zip
05-2003	CURRENT	3612 W Harrison St Chandler AZ 85226			

(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) Jared Michael Repinski 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:  Date: 5-10-2023

LC: _____
Amount: _____



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 246213
Date Accepted: 5-12-2023
CSR: Chapman

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**

805-370

License Number: _____

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: Hernandez Thomas C Birth Date: _____
Last First Middle (NOT a public record)

3. Social Security #: _____ IRS License #: _____ State Issued: AZ

4. Place of birth: Nuevo IDEAL Durango MEXICO Height: 5-10 Weight: 186 Eyes: Bc Hair: Bk
City State COUNTRY

5. Name of current/most recent spouse: Garcia Norma Raquel Birth Date: _____
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 1982

7. Daytime telephone number: 928-241-1031 Email address: Thomas333@gmail.com

8. Premises Name: Camelion Cafe Business Phone: 928-524-2496

9. Premises Address: 2102 Navajo Blvd Holbrook AZ 086025
Street (do not use PO Box) City State County Zip
Navajo 08

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)
04/2014	CURRENT	Owner	Camaleon Cave / 2102 Navajo St, Holbrook AZ 86025

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
05/2013	CURRENT	1710W Dewitt RD	Holbrook	AZ	86025

(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) Tomás C. 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: Tomás Hernandez Date: 5-10-23



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY	
Job #:	246213
Date Accepted:	5-19-2023
CSR:	Chay

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:

Date	Name of Applicant:		
5-10-2023	Thomas C Hernandez		
Name of Fingerprint Technician:			
Jared Michael Roberts			
Fingerprint technician's Signature:			
			
Fingerprint technician's Agency/company Name:		Phone Number:	
AATF		480 661-0389	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			

LC:
Amount:



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 246213
Date Accepted: 5-12-2023
CSR: Chay

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**

805-370

License Number:

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: Hernandez Oscar B Birth Date: [REDACTED]
Last First Middle (NOT a public record)

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

4. Place of birth: Flagstaff AZ U.S. Height: 6' Weight: 203 Eyes: Blue Hair: brown
City State COUNTRY

5. Name of current/most recent spouse: NA Birth Date:
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? Nov 27th 1998

7. Daytime telephone number: 928-241-2598 Email address: Oghernandez27@icloud.com

8. Premises Name: Cameleon Cafe Business Phone: 928/5242446

9. Premises Address: 2102 Navajo Blvd Hollbrook AZ U.S. 86025
Street (do not use PO Box) City State County Zip
Navajo

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)
10/2022	CURRENT	Manager	Camaleon Cafe / 2107 Navajo Blvd Holbrook, AZ, 86025
12/2020	current	Engineer	U.S. Army / 20525 N Pinal Parkway Ave Florence AZ 85128
05/2018	12/2020	Delivery	Amazon / 8664 E Elliot Rd, Mesa, AZ, 85212

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
10/2022	CURRENT	1710 W Dewit RD	Holbrook	AZ	86025
10/2020	10/2022	1515 S EXTENSION RD	Mesa	AZ	85201
05/2018	12/2020	1710 Dewit RD	Holbrook	AZ	86025

(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) Oscar G 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: [Signature] Date: 05/10/2023



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY	
Job #:	246213
Date accepted:	5-12-2023
CSR:	Chavez

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:

Date 5-10-2023	Name of Applicant: OSCAR G HERNANDEZ		
Name of Fingerprint Technician: JARED MICHAEL REYNOLDS			
Fingerprint technician's Signature: 			
Fingerprint technician's Agency/company Name: AATF		Phone Number: 480 664-0389	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			

Certificate # JR4262023-2-2

*23 MAY 12 PM 2:01 AZD LLC

<input checked="" 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

Oscar Hernandez

Full Name (please print)


Signature

April 26, 2023

Training Completion Date

April 26, 2026

Certificate Expiration Date
(three years from completion date)

Training Provider Information

AATF – All-Star Alcohol Awareness

Company Name

P.O. Box 6252, Chandler, Arizona 85246

Mailing Address

(480) 664-0389

Daytime Contact Phone Number

Jared Repinski

Instructor Name (please print)

I, Jared Repinski, certify that the above named individual did successfully complete

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 / 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) |

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

Oscar Hernandez

Full Name (please print)



Signature

April 26, 2023

Training Completion Date

April 26, 2026

Certificate Expiration Date
(three years from completion date)

Training Provider Information

AATF – All-Star Alcohol Awareness

Company Name

P.O. Box 6252, Chandler, Arizona 85246

Mailing Address

(480) 664-0389

Daytime Contact Phone Number

I, **Jared Repinski**, 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

26 / 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) |

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.

ORDINANCE 23-03

AN ORDINANCE OF THE CITY OF HOLBROOK, ARIZONA, LEVYING A PRIMARY PROPERTY TAX UPON THE ASSESSED VALUATION OF PROPERTY LOCATED WITHIN THE CITY SUBJECT TO TAXATION, FOR THE FISCAL YEAR ENDING JUNE 30, 2024

WHEREAS, in 2019 residents of the City of Holbrook passed a primary property tax; and

WHEREAS, the City Council has the authority to levy and collect taxes for the general expenses of the City and all lawful municipal purposes per Holbrook City Charter Section 6.02(a); and

WHEREAS, a public hearing was held on June 22, 2023, to discuss the budget; and

WHEREAS, pursuant to State law, an ordinance levying taxes is required to be adopted no later than the third Monday in August; and

WHEREAS, Navajo County is the assessing and collecting authority for the City of Holbrook.

NOW THEREFORE, BE IT ORDAINED BY THE MAYOR AND COUNCIL OF THE CITY OF HOLBROOK:

SECTION 1: There is hereby levied a rate of \$0.4784 on each one hundred dollars (\$100.00) of assessed valuation of all property located within the corporate limits of the City of Holbrook, except such property as may be exempt by law from taxation, a tax rate sufficient to raise the amount of \$108,057 as required in the Fiscal Year 2024 Budget.

SECTION 2: Per State law, this ordinance shall become effective upon adoption.

SECTION 3: The City Clerk is directed to transmit a certified copy of this Ordinance to the County Assessor and the Board of Supervisors of Navajo County, Arizona.

PASSED AND ADOPTED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF HOLBROOK, ARIZONA, this 13th day of July 2023.

APPROVED/EXECUTED:

APPROVED AS TO FORM:

Kathleen Smith, Mayor

Bradley A. Burns, City Attorney

ATTEST:

Lisa Hunt, City Clerk

CERTIFICATION

I certify that the forgoing Ordinance was duly passed, and adopted by the Holbrook City Council, at a regular meeting on July 13, 2023.

Lisa Hunt, City Clerk

RESOLUTION 23-04

A RESOLUTION OF THE MAYOR AND COUNCIL OF THE CITY OF HOLBROOK, NAVAJO COUNTY, ARIZONA ADOPTING THE FINAL BUDGET OF THE CITY OF HOLBROOK FOR THE FISCAL YEAR 2024

WHEREAS, by Resolution 23-03, the Mayor and City Council, passed and adopted the Tentative Budget for the City of Holbrook, Fiscal Year 24; and

WHEREAS, following due public notice, the Mayor and City Council held a public hearing on June 22, 2023, at which meeting, any taxpayer could appear and be heard in favor or against any of the proposed expenditures and expenses or tax levies; and

WHEREAS, expenditures do not exceed the spending limitation set forth in Article IX, Section 20 of the Arizona State Constitution.

NOW THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF HOLBROOK, that the estimates of revenues and expenditures, as shown on the accompanying schedules, are adopted as the Final Budget of the City of Holbrook, Navajo County, Arizona for the Fiscal Year 24.

PASSED AND ADOPTED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF HOLBROOK, ARIZONA, this 22nd day of June 2023.

APPROVED/EXECUTED:

APPROVED AT TO FORM:

Kathleen Smith, Mayor

Bradley A. Burns, City Attorney

ATTEST:

Lisa Hunt, City Clerk

**City of Holbrook
Council Action Form**

Meeting Date: June 22, 2023

Tab: _____

To: Mayor and City Council

From: Ted Soltis, City Manager

Subject: Charter Review Committee

Discussion: Article XVI Amendments, Section 16.02 Charter Review of the Charter reads: The mayor, with approval of the Council, may appoint a committee of seven (7) electors of the City to review this Charter for applicability and content to best serve the City of Holbrook and its citizens at least once every four (4) years. Elected City Officials, appointed City Department Heads and City employees are prohibited from serving on this Committee.

The committee was readvertised in the newspaper and on the city's website. No new applicants received.

There are now a total of eight applicants: Richard Peterson, Kent Darris, Merrill Young, Robin Gonzales, Mark Romo, Steven Carbonneau, Rebecca Slade, and Gretchen Herndon.

Fiscal Impact: N/A

Recommendation: Consent to the mayor's appointments.

Approved by: _____


Ted Soltis, City Manager