

DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit <http://www.abc.ca.gov/distmap.html>
Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.

LICENSE NUMBER 95068760	GEO CODE
RECEIPT NUMBER 2443574	
FEE \$ 50 -	

1. ORGANIZATION'S NAME Rotary Club of Mendocino CONDITIONS REQUIRED Yes No DIAGRAM REQUIRED Yes No

2. LICENSE TYPE (Check appropriate license type AND organization type)

a. **Daily General (\$25.00)** (Includes beer, wine and distilled spirits)

Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure Fraternal Organization in Existence Over Five Years with Regular Membership

Organization Formed for Specific Charitable or Civic Purpose Religious Organization

Other: Rotary Vessel per Section 24045.10 B&P (\$50.00)

NUMBER OF DISPENSING POINTS _____

b. **Special Daily Beer (\$25.00)** **Special Daily Beer & Wine (\$50.00)** **Special Daily Wine (\$25.00)**

Charitable Fraternal Social Political Other: _____

Civic Religious Cultural Amateur Sports Organization

NUMBER OF DISPENSING POINTS 2

c. **Special Temporary License (\$100.00)** (Different privileges depending on statute)

Television Station per Section 24045.2 or 24045.9 B&P Person conducting Estate Wine Sale per Section 24045.8 B&P

Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P Women's Educational and Charitable Organization per Section 24045.3 B&P

Other Special Temporary Licenses, per Section _____

License number	Amount \$

3. EVENT TYPE

Dinner Dance Wedding Lunch Picnic Barbeque Social Gathering Festival

Sports Event Concert Birthday Mixer Carnival Dinner Dance Other: _____

4. TOTAL # OF DAYS 1 5. ESTIMATED ATTENDANCE 70 6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION

From 8:00 AM To 4:00 PM

7. EVENT DATE(S) 8-26-17 8. EVENT IS OPEN TO THE PUBLIC Yes No

9. EVENT LOCATION (Give facility name, if any, street number and name, and city)
Little River Inn Golf Course 7901 N. Hwy 1, Little River

10. LOCATION IS WITHIN THE CITY LIMITS Yes No 11. TYPE OF ENTERTAINMENT _____ 12. SECURITY GUARDS Yes No If yes, how many? _____

13. AUTHORIZED REPRESENTATIVE'S NAME JAMES NEGROFF 14. REPRESENTATIVE'S TELEPHONE NUMBER 707 359 6050

15. REPRESENTATIVE'S ADDRESS PO Box 208 Little River CA ~~95456~~ 95456

16. ORGANIZATION'S MAILING ADDRESS (if different from #15 above) PO Box 102 Mendocino CA 95460

17. AUTHORIZED REPRESENTATIVE'S SIGNATURE [Signature] 18. DATE SIGNED 8-12-17

PROPERTY OWNER APPROVAL BY (Name), REQUIRED PHONE NUMBER 937-5942 PROPERTY OWNER SIGNATURE Susan E McCreary DATE SIGNED 6/26/2017

LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE Mendocino Co. S/O PHONE NUMBER 201-964-6308 LAW ENFORCEMENT SIGNATURE G. [Signature] #1159 DATE SIGNED 7-6-17

DISTRICT OFFICE APPROVAL BY (Name) [Signature] ABC EMPLOYEE SIGNATURE [Signature] ISSUANCE DATE 12/28/17

The above-named organization is hereby licensed, pursuant to the California Business and Professions Code Division 9 and California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above named location for the period authorized above. This license does not include off-sale ("to-go") privileges.

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State.

RECEIVED RECEIVED

JUL 14 2017

JUN 15 2017

Dept. of Alcoholic Beverage Control
Santa Rosa

Alcoholic Beverage Control
Santa Rosa