

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

ABC 211 (6/99)

Ms. Elizabeth

TO: Department of Alcoholic Beverage Control
 33 NEW MONTGOMERY STREET
 SUITE 1230
 SAN FRANCISCO, CA 94105
 (415) 356-6500

File Number: **599202**
 Receipt Number: **2527750**
 Geographical Code: **3800**
 Copies Mailed Date: **September 24, 2018**
 Issued Date:

*BULLARD**(415) 350-0581*DISTRICT SERVING LOCATION: **SAN FRANCISCO**

First Owner: **BULLARD, ELIZABETH HOLLY**
 Name of Business: **CHIOTRAS GROCERY**
 Location of Business: **858 RHODE ISLAND ST**
SAN FRANCISCO, CA 94107-2611

County: **SAN FRANCISCO**Is Premise inside city limits? **Yes**Census Tract **0227.04**

Mailing Address:
 (If different from
 premises address)

Type of license(s): **21**Transferor's license/name: **463393 / RANTISI, DAWUD FAYEQ**Dropping Partner: Yes ☐ No ☐

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
21 - Off-Sale General	ANNUAL FEE	NA	Y	0	09/24/18	\$646.00
21 - Off-Sale General	PREMISE TO PREMISE TRANSFER	NA	Y	0	09/24/18	\$100.00
21 - Off-Sale General	PERSON-TO-PERSON TRANSFER	NA	Y	0	09/24/18	\$1,250.00
Total						\$1,996.00

Have you ever been convicted of a felony? **No**

Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the
 Department pertaining to the Act? **No**

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in an on-sale licensed premises will have all the qualifications
 of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the
 Alcoholic Beverage Control Act.

STATE OF CALIFORNIA County of **SAN FRANCISCO**Date: **September 24, 2018**

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Effective July 1, 2012, Revenue and Taxation Code Section 7057, authorizes the State Board of Equalization and the Franchise Tax Board to share taxpayer information with Department of Alcoholic Beverage Control. The Department may suspend, revoke, and refuse to issue a license if the licensee's name appears in the 500 largest tax delinquencies list. (Business and Professions Code Section 494.5.)

Applicant Name(s)

Applicant Signature(s)

BULLARD, ELIZABETH HOLLY