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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 — Stockton (DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): On Sale Beer & Wine Public Premises

Applied under Sec. 24044 ☐
Effective Date: Issuance

FILE NO.
RECEIPT NO. 358298
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S): CARDENAS, Ana-Maria/Roberto

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Original License	$ 300.00	42
Annual Fee	195.00	
TOTAL	$ 495.00	

4. Name of Business: Salon Mexaco

5. Location of Business—Number and Street: 23-25 N. Sacramento Street

City and Zip Code: Lodi, 95240 — County: San Joaquin

6. If Premises Licensed, Show Type of License: 42

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street: Same

(Temp) (Perm): Perm

9. Have you ever been convicted of a felony? Yes - R.C. No A.C.

10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act? No R.C. A.C.

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.
R.C. Possession of controlled substance

12. Applicant agrees (a) that any manager employed in 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.

13. STATE OF CALIFORNIA — County of San Joaquin — Date 6-9-87

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the 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 application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' 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 of 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.

14. APPLICANT SIGN HERE: Robert Cardenas — Ana Maria Cardenas

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA — County of _____ Date _____

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) 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 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 of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)

19. Location — Number and Street — City and Zip Code — County

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Attached: ☐ Recorded notice. ☐ Fiduciary papers. ☐ _____ (OTHER)

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☐ Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____

ABC 211 (1-82)

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 — Stockton (DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): ON SALE GENERAL EATING PLACE

Applied under Sec. 24044 ☐
Effective Date: When Trfd

FILE NO.
RECEIPT NO. 2383-9
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S): YORK, Donald/Kathleen

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Per to Per	$ 1250.00	47
TOTAL	$ 1250.00	

4. Name of Business: Ponderosa Rib House
5. Location of Business—Number and Street: 110 N. Cherokee Lane
City and Zip Code: Lodi, Ca. 95240 — County: San Joaquin
6. If Premises Licensed, Show Type of License: 47 Rule 65
7. Are Premises Inside City Limits? Yes (Temp) (Perm)
8. Mailing Address (if different from 5)—Number and Street: P.O. Box 258 Lodi, ca. 95241 — Same
9. Have you ever been convicted of a felony? No
10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act? No
11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.
12. Applicant agrees (a) that any manager employed in 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.
13. STATE OF CALIFORNIA — County of San Joaquin — Date 6-10-87

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the 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 application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' 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 of 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.

14. APPLICANT SIGN HERE: Donald York — Kathleen York

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA — County of San Joaquin — Date 6-10-87

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) 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 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 of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)
Judith E. WHARTON	Judith E. Wharton	47-157645

19. Location — Number and Street: Same — City and Zip Code — County

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Attached: ☒ Recorded notice,
☐ Fiduciary papers,
☐ _____ (OTHER) COPIES MAILED 6-10-87

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ABC 211 (1-82) — 85 93451

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818

Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)

ON SALE BEER AND WINE
EATING PLACE

Applied under Sec. 24044 ☐
Effective Date: When Trfd

FILE NO.

RECEIPT NO. 358372

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

MURDACA, James Pietro

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Per to Per	$ 150.00	41
TOTAL	$ 150.00	

4. Name of Business
Pietro's of Lodi

5. Location of Business—Number and Street
317 E. Kettleman Lane

City and Zip Code: Lodi 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License: 41

7. Are Premises Inside City Limits? Yes (Temp) (Perm) Perm

8. Mailing Address (if different from 5)—Number and Street
Same

9. Have you ever been convicted of a felony? No

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

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in 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.

13. STATE OF CALIFORNIA County of San Joaquin Date 6-17-87

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the 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 application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' 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 of 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.

14. APPLICANT SIGN HERE

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of San Joaquin Date 6-17-87

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16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)
PIETRO's PIZZA PARLORS, INC.		41-171949

19. Location Number and Street: Same City and Zip Code County

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Attached: XXX Recorded notice,
☐ Fiduciary papers,
☐ _____ (OTHER)

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ABC 211 (1-82) (85 9345)