

License Type: 32 One Day Beer  
License Nontransferable

LICENSE NO. 9541862  
Receipt No. 2520542  
Fee Paid \$50.00  
Geographical Code 3405

**APPLICATION:**

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION: CALIFORNIA CRAFT BREWERS ASSOCIATION  
LOCATION ADDRESS: CAPITOL MALL  
3RD ST & 7TH ST  
SACRAMENTO, CA 95814

TYPE OF EVENT: FESTIVAL  
HR/DATES DURING WHICH ALCOHOL WILL BE SOLD: September 8, 2018  
10AM - 4:30PM

ESTIMATED ATTENDANCE: 5000

AUTHORIZED REPRESENTATIVE / ADDRESS

LEIA BAILEY  
916 228 4260

**LICENSE:**

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. 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.



Good for 1 day(s). Date Issued August 27, 2018.

Director of Alcoholic Beverage Control

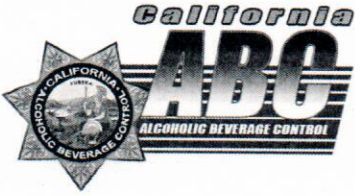
By \_\_\_\_\_





**SACRAMENTO POLICE DEPARTMENT  
ONE-DAY ALCOHOL BEVERAGE PERMIT REQUEST**

1. Type of License <small>(Check all that apply)</small>		<input checked="" type="checkbox"/> BEER	<input type="checkbox"/> WINE	<input type="checkbox"/> GENERAL <small>(Includes beer, wine &amp; distilled spirits)</small>
2. Name Of Non-Profit Organization California Craft Brewers Association		3. Non-Profit Tax Exempt Number 94-3138723		
4. Event Address Capitol Mall, 3rd Street- 7th Street		5. Event Facility Name/ Entertainment Permit # Capitol Mall		
6. Event Type <small>(ex: Dance, Festival, Fundraising Dinner, Second Saturday)</small> Beer Tasting		7. Event Date 9/8/2018	8. Hours Of Event From: 10 To: 4:30	
9a. Event Contact Name: Laurie Holtog		9b. Event Contact E-mail Address laurie@californiacratbeer.com		
9c. Event Contact Phone Number: (916) 228-4260				
10a. (If Catered) Licensee Name		10b. License Number	10c. Caterer Phone Number	
11. Event Open to Public <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	12. Outdoor <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <small>**If event is outdoors a site map <u>must</u> be attached</small>		13. Will People Under Age 21 Be Allowed Into The Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14. Estimated Attendance 5000	15. Admission Fee \$ 10-\$60	16. Drink Ticket Fee \$ N/A	17. Who Receives Proceeds CCBA	
18. Hours Of Alcohol Service From: 10 To: 4:30	19. Street Closure <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	20. Live Music <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	21. Amplified Sound / DJ <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
22. How Many Events Has Applicant Held In Previous 12 Months? <u>2</u> <small>If Applicable, Please List Last Two Event Dates and Locations:</small> California Craft Beer Summit & Beer Festival; Sept. 7-9, 2017				
23. Has There Been A Police Response To Previous Permitted Events(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>If "YES" Please Explain:</small>				
24. Will Uniformed Security Be Present During Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
25. Name of Security Company: Members in Black		26. Number Of Uniformed Security Officers: 20		
<b>THIS SECTION FOR SACRAMENTO POLICE DEPARTMENT USE ONLY</b>				
27. Application Received By: B. Perez #6708		Date: 8/02/18		
28. Applicant Notified By: Jue		Date: 8/31/18		
<b>29. MANDATED EVENT CONDITIONS:</b>				
<input checked="" type="checkbox"/> The licensee will provide licensed, uniformed security. <input type="checkbox"/> The licensee will provide security from The Sacramento Police Department. <input type="checkbox"/> Alcohol will be served in plastic/paper cups <input type="checkbox"/> Alcohol cups will be identifiable from soft drink cups <input checked="" type="checkbox"/> Cups will not be larger than 16oz. <input type="checkbox"/> Only two (2) cups per sale to a person <input type="checkbox"/> For outdoor events, no alcoholic beverages beyond designated fenced in area <input checked="" type="checkbox"/> Signs must be posted at all exits: "NO ALCOHOL BEYOND THIS AREA" <input checked="" type="checkbox"/> Volunteers are prohibited from consuming alcoholic beverages while working <input checked="" type="checkbox"/> Must follow all Sacramento City Codes <input checked="" type="checkbox"/> Must comply with establishments entertainment permit conditions				
30. Permit Request Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
31. Approved By: 		Date: 8-2-18		



State of California  
RECEIPT FOR PAYMENT

Department of Alcoholic Beverage Control

Paid For: CALIFORNIA CRAFT BREWERS ASSOCIATION  
Received at: SACRAMENTO DISTRICT Office

Received: August 27, 2018  
Receipt No: 2520542  
Total Amount: \$50.00

Payment Method	ID#	Amount	Paid By
MONEY ORDER	0033903415	\$50.00	LEIA O BAILEY

Accounting Comment:

Detail Transaction	Job #	Dup	Unit Cost	Quantity	Amount Paid
32 - ODL B	9541862	2		1	\$50.00

BY: \_\_\_\_\_