



## City of Jonesboro Private Club Review and Conditions Form

Date 8-14-23 Non-Profit Corp. Jonesboro Studio Social Club  
 Address 916 Oriole Dr  
 Applicant on Behalf of Club Jefferson Ayers  
 Home Address 916 Oriole DR Jonesboro, AR  
 Business Name Jonesboro Cinema Grill  
 Business Address 1008 Canera DR Jonesboro, AR

**City of Jonesboro official use below this:**

**Police Department:** Copy of membership list Yes  No   
 Has any member been convicted of a felony? Yes  No   
 If yes, How many years since conviction? \_\_\_\_\_  
 Has Non-Profit complied with City of Jonesboro laws? Yes  No

Comments: \_\_\_\_\_

Approve? Yes  No  Signature Chief of Police *Rick Elliot*

**Planning and Zoning Department:**

Type of Private Club: Restaurant  Hotel/Motel   
 Hours of Operation? \_\_\_\_\_  
 Copy of menu for food service? Yes  No   
 Zoning TC-0

Approve? Yes  No  Signature Planning Director *Mary Ann*

**City Clerk:**

Date received \_\_\_\_\_  
 Date entered in Legistar \_\_\_\_\_

**City Council Action**

Approve \_\_\_\_\_ Deny \_\_\_\_\_



**APPLICATION FOR PRIVATE CLUB PERMIT  
MUST BE NON-PROFIT CORPORATION**  
On file at Arkansas Secretary of State's Office

**INSTRUCTIONS**

1. Answer all questions correctly and in full. **PLEASE PRINT IN INK OR TYPE.**  
**NOTE: FORMS MUST BE NOTARIZED.**

**APPLICATION MUST BE ACCOMPANIED BY CRIMINAL BACKGROUND  
INVESTIGATION RESULTS OF THE APPLICANT (FORMS AND INSTRUCTIONS ENCLOSED).**

2. Application fee is \$250 and must be submitted with this application.
3. Applicant must be a citizen of the United States or a permanent resident alien (must provide a copy of green card), and a resident of Arkansas.
4. The following additional materials must be submitted with your application:
  - a. A current list of names and addresses of all board members, and a signed "authority to release information form" from each board member.
  - b. The address where the business will be located. If the non-profit corporation does not own the property, a copy of the lease, option to lease, option to purchase, or buy-sell agreement in favor of the non-profit corporation must be attached.

**MAIL OR DELIVER DIRECTLY TO:**

**Chief of Police  
Jonesboro Police Department  
1001 S. Caraway Road  
Jonesboro, Arkansas 72401**

OFFICIAL RECEIPT

Receipt Date 08/07/2023 11:52 AM

Receipt Print Date 08/07/2023

Receipt # 00235787

Batch # 00007.08.2023

CITY OF JONESBORO  
300 S. Church St. Ste 106  
PO Box 1845  
JONESBORO, AR 72403-1845  
870-932-3042

For Permit Inspections call 870-933-4602

Account/License/Permit/Category:  
CR 250.00

Detail:  
01-134-0517-00  
Alcohol Application Fee Malc  
o 250.00

-----  
Total 250.00

Payment Information:  
Check 1070 250.00  
Change 0.00

Jeff Ayers (Malco)  
Customer #: 000000  
Jonesboro Studio Social Club

Cashier: tmmoss  
Station: COLLECTIONSWIND

CITY OF JONESBORO

APPLICATION FOR PRIVATE CLUB PERMIT

We hereby make an application for a permit to serve alcoholic beverages on our premises to the club's adult members, members of their families over the age of 21, and duly qualified guests,

Jonesboro Studio Social Club  
Non-Profit Corporation

FEIN # \_\_\_\_\_

APPLICANT ON BEHALF OF CLUB

Jefferson Ayers  
First Middle Last

HOME ADDRESS

916 Oriole Drive Jonesboro AR 72401  
Street City Zip County

BUSINESS NAME

Jonesboro Cinema Grill

BUSINESS ADDRESS

1008 Camera Dr. Jonesboro AR 72403 Craighead  
Street City Zip County

Does the club own the premises? NO If leased, give name and address of owner: \_\_\_\_\_

Is your establishment primarily engaged in the business of serving food for consumption on the premises?  
yes

If the answer to the above question is no, then what type of business will you be engaged in on the premises? Please list all activities to be offered.  
\_\_\_\_\_

Does anyone now hold an alcoholic beverage permit at this location? NO If so, give name, address and permit no(s).  
\_\_\_\_\_

Give names and addresses of all officers/directors of the non-profit organization:

NAME	TITLE	ADDRESS
David Tashie	President	266 E. Cherry Road Memphis,
Wes Lundsford	Secretary	2118 Kirby Road Memphis, TN 38
Jefferson Ayers	Director	916 Oriole Dr. Jonesboro, AR 7
Amanda Brown	Director	843 cr 361 Bono AR 72416
Michael Huggins	Director	4 Autumn Ln Bella Vista AR 72214

Has any member of the club's board of directors or other governing body, or any club officer, been under the sentence, whether suspended or otherwise, of any court for the conviction of a felony within two (2) years preceding the date of this application? YES  NO  If yes, please explain -

Signed this 14 day of August, 2023

Signature of Applicant/Managing Agent

Official Title

Subscribed and sworn to before me this 14 day of August, 2023.

My Commission Expires:

July 6, 2024

Notary Public

OFFICIAL SEAL - #12399655  
**AMY ELROD**  
NOTARY PUBLIC-ARKANSAS  
CRAIGHEAD COUNTY  
MY COMMISSION EXPIRES: 07-06-24

SCHEDULE A - INDIVIDUAL'S PERSONAL HISTORY



ISSUES 1/20/02

Application filed by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

I submit answers to the following questions under oath:

1. Name Jefferson T Ayers Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_
2. Home Address: 916 Orinda Dr Jonesboro 77405 Phone No. 901-412-6669  
Street City Zip
3. Are you a person of good moral character and reputation in your community? Yes
4. Are you a (CITIZEN) or (PERMANENT RESIDENT ALIEN) of the United States? CIRCLE ONE  
Social Security No. \_\_\_\_\_ Green Card No. \_\_\_\_\_
5. Are you a resident of the county in which application has been made? Yes  
If not, do you live within 35 miles of the premises to be permitted? \_\_\_\_\_
6. Have you ever been convicted of a felony? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_
7. Have you been convicted of any violation of any law relating to alcoholic beverages within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_
8. Have you had any alcoholic beverage permit issued to you revoked within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_
9. Do you presently hold or have you ever held an alcoholic beverage permit(s)? Yes If so, give name, place, and permit number(s)  
Jefferson Ayers, Jonesboro, #06159
10. Have you applied and been refused a permit at the applied for location within the last 12 months? No If so, give full information \_\_\_\_\_
11. Marital Status: Single ( ) Married X Divorced ( ) Separated ( ) Other ( )
12. Furnish complete information regarding members of immediate family:  

Relationship	Full Name	Address	Occupation
<u>Wife</u>	<u>Shannon D Ayers</u>	<u>same</u>	<u>HA/Billing</u>



\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(a) Are any of the above to be connected with the operation of the outlet? NO

(b) If so, who and in what capacity? \_\_\_\_\_

13. Give your home address (city or town) and dates at each for the past five (5) years:

916 Oriole dr Jonesboro, AR, 72405 (a11)

14. Covering the past five (5) years, give in detail the following:

Your Business or Occupation	Name & Address of Employer	Dates of Employment
<u>General Manager</u>	<u>Malco Theaters 7407 E Parker Rd</u>	<u>7/4/2008 - m</u>

I hereby state on oath that I will not violate any law of this State or any regulation of the Alcoholic Beverage Control Division, nor will any agent or employee be allowed to violate any law or regulation. It is hereby consented that the licensed premises and its books and records shall be open at all times to all law enforcement officials without warrant or other legal process.

TENNESSEE  
STATE OF ARKANSAS

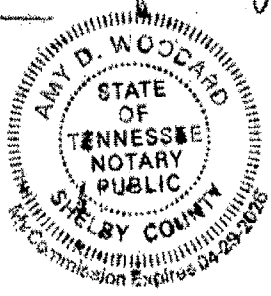
[Signature]  
Applicant's Signature

COUNTY OF SHELBY  
JEFFERSON T. AYERS

being first duly sworn on oath deposes and says that he/she has read each of the questions to which he/she has made answer, and that his/her said answers in each instance are true and correct.

Subscribed and sworn to before me this 30th day of June 2023

My Commission Expires: 4/29/20  
Amy D. Woodard  
Notary Public





AUTHORITY TO RELEASE INFORMATION

Application filed by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

[Signature]  
Signature - Full Name  
6-30-2023  
Date

916 Oriole Dr  
Home Address

Jonesboro AB 77405  
City State Zip

same  
Mailing Address

City State Zip

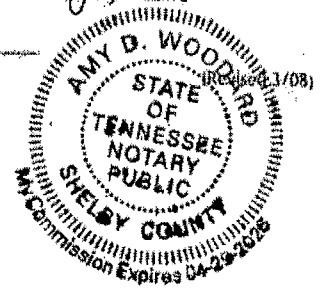
901-412-6669 870-910-5000  
Contact Phone Business Phone

jpurpleneon@yahoo.com  
E-Mail Address

Sworn and subscribed before me this 30<sup>th</sup> day of June 2023

Amy D. Woodard  
Notary Public

My Commission Expires: 4/29/26





SCHEDULE A - INDIVIDUAL'S PERSONAL HISTORY



Application filed by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

I submit answers to the following questions under oath:

1. Name Amanda Elizabeth Brown Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_
2. Home Address 843 CR 361 Bono 72416 Phone No. 870-897-6127  
Street City Zip
3. Are you a person of good moral character and reputation in your community? yes
4. Are you a CITIZEN or (PERMANENT RESIDENT ALIEN) of the United States? CIRCLE ONE  
Social Security No. \_\_\_\_\_ Green Card No. \_\_\_\_\_
5. Are you a resident of the county in which application has been made? yes  
If not, do you live within 35 miles of the premises to be permitted? \_\_\_\_\_
6. Have you ever been convicted of a felony? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_
7. Have you been convicted of any violation of any law relating to alcoholic beverages within the five (5) years preceding this application? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_
8. Have you had any alcoholic beverage permit issued to you revoked within the five (5) years preceding this application? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_
9. Do you presently hold or have you ever held an alcoholic beverage permit(s)? NO If so, give name, place, and permit number(s) \_\_\_\_\_
10. Have you applied and been refused a permit at the applied for location within the last 12 months? NO If so, give full information \_\_\_\_\_
11. Marital Status: Single ( ) Married ( ) Divorced (X) Separated ( ) Other ( )
12. Furnish complete information regarding members of immediate family:  

Relationship	Full Name	Address	Occupation
Daughter	Anna Sophia Weist	843 CR 361 Bono, AR 72416	Mix
Father	Thomas D. Brown	2105 CR 353 Bono, AR 72416	chi
Mother	Luth A. Brown	2105 CR 353 Bono, AR 72416	Ret



\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(a) Are any of the above to be connected with the operation of the outlet? NO

(b) If so, who and in what capacity? \_\_\_\_\_

13. Give your home address (city or town) and dates at each for the past five (5) years:

843 CR 361, Bono, AR 72416 2016 to present

14. Covering the past five (5) years, give in detail the following:

Your Business or Occupation	Name & Address of Employer	Dates of Employment
<u>General Manager</u>	<u>Malco Theatres Memphis, TN</u>	<u>5/2021 -&gt; present</u>
<u>Staff Manager / Team Member</u>	<u>Malco Theatres 5851 Ridgway Center Pkwy Memphis, TN, 38120</u>	<u>12/17/2012 -&gt; 5/2021</u>

I hereby state on oath that I will not violate any law of this State or any regulation of the Alcoholic Beverage Control Division, nor will any agent or employee be allowed to violate any law or regulation. It is hereby consented that the licensed premises and its books and records shall be open at all times to all law enforcement officials without warrant or other legal process.

TENNESSEE  
STATE OF ~~ARKANSAS~~  
COUNTY OF SHELBY  
AMANDA E. BROWN

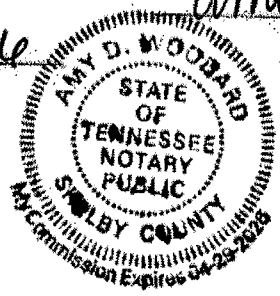
Amanda E Brown  
Applicant's Signature

being first duly sworn on oath deposes and says that he/she has read each of the questions to which he/she has made answer, and that his/her said answers in each instance are true and correct.

Subscribed and sworn to before me this 30<sup>th</sup> day of June 2023

My Commission Expires: 4/29/2026

Amy D. Woodard  
Notary Public





AUTHORITY TO RELEASE INFORMATION

Application filed by Applicant - A, Stockholder/Partner - S: \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

Amanda Elizabeth Brown  
Signature - Full Name

6/30/2023  
Date

843 CR 361  
Home Address

Bono                      AR                      72416  
City                                      State                                      Zip

P.O. Box 49  
Mailing Address

Bono                      AR                      72416  
City                                      State                                      Zip

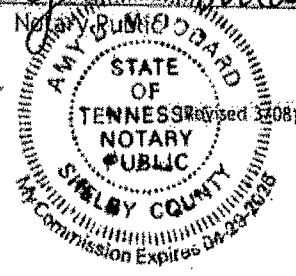
870-897-6127                      870-558-5767  
Contact Phone                                      Business Phone

amanda.brown@malco.com  
E-Mail Address

Sworn and subscribed before me this 30<sup>th</sup> day of June 2023

Amy R Woodard  
Notary Public

My Commission Expires: 4/29/2024



SCHEDULE A - INDIVIDUAL'S PERSONAL HISTORY



OR 2675 D065M

Application filled by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

I submit answers to the following questions under oath:

1. Name MICHAEL HUGGINS Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_
2. Home Address YACUMIN LN Bella Vista, MD 21114 Phone No. 301-596-2124  
Street City Zip
3. Are you a person of good moral character and reputation in your community? YES
4. Are you a (CITIZEN) or (PERMANENT RESIDENT ALIEN) of the United States? **CIRCLE ONE**  
Social Security No. \_\_\_\_\_ Green Card No. \_\_\_\_\_
5. Are you a resident of the county in which application has been made? No  
If not, do you live within 35 miles of the premises to be permitted? No
6. Have you ever been convicted of a felony? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

7. Have you been convicted of any violation of any law relating to alcoholic beverages within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

8. Have you had any alcoholic beverage permit issued to you revoked within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

9. Do you presently hold or have you ever held an alcoholic beverage permit(s)? YES If so, give name, place, and permit number(s)  
PROLZACK CINEMA FORT LEE, NJ # 4768-02 - SPAINIAUX CINEMA, SPAINIAUX, NJ 4666-02  
ROGERS CINEMA, ROGERS, NJ 4731-02

10. Have you applied and been refused a permit at the applied for location within the last 12 months? No If so, give full information \_\_\_\_\_

11. Marital Status: Single ( ) Married (X) Divorced ( ) Separated ( ) Other ( )

12. Furnish complete information regarding members of immediate family:

Relationship	Full Name	Address	Occupation
WIFE	AMY HUGGINS	4 YACUMIN LN, BELLA VISTA MD 21114	HOUSE WIFE
MOTHER	ANNETTE HUGGINS	5249 ORANGE RD MEMPHIS, TN 38117	RETIRED
FATHER	JOSPH HUGGINS	5249 ORANGE RD MEMPHIS, TN 38117	RETIRED



BROTHER RONALD HUGGINS 2517 LOUIS DR MEMPHIS TN 38119 SHIRAZ SUPERMARKET

(a) Are any of the above to be connected with the operation of the outlet? No

(b) If so, who and in what capacity? \_\_\_\_\_

13. Give your home address (city or town) and dates at each for the past five (5) years:

4 HERMIT LN BELLA VISTA 2017 - PRESENT.

14. Covering the past five (5) years, give in detail the following:

Your Business or Occupation	Name & Address of Employer	Dates of Employment
<u>DISTRICT MANAGER</u>	<u>ALCOHOL TAXATION FOR SBTI REGULATORY CONTROL DEPT MEMPHIS, TN 38120</u>	<u>1993 - PRESENT</u>

I hereby state on oath that I will not violate any law of this State or any regulation of the Alcoholic Beverage Control Division, nor will any agent or employee be allowed to violate any law or regulation. It is hereby consented that the licensed premises and its books and records shall be open at all times to all law enforcement officials without warrant or other legal process.

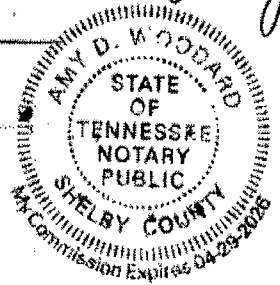
[Signature]  
Applicant's Signature

~~TENNESSEE~~  
STATE OF ARKANSAS  
COUNTY OF SHELBY

MICHAEL HUGGINS, being first duly sworn on oath deposes and says that he/she has read each of the questions to which he/she has made answer, and that his/her said answers in each instance are true and correct.

Subscribed and sworn to before me this 30<sup>th</sup> day of June, 2023

My Commission Expires: 4/29/24  
Amy D. Woodard  
Notary Public





AUTHORITY TO RELEASE INFORMATION

Application filled by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

[Signature]  
Signature - Full Name

6/30/23  
Date

4 HERMIT LN  
Home Address

Bella Vista Ark 72714  
City State Zip

4 HERMIT LN  
Mailing Address

Bella Vista Ark 72714  
City State Zip

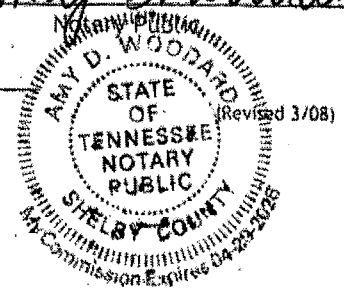
701-570-2124  
Contact Phone Business Phone

michael.huss@n21co.com  
E-Mail Address

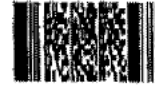
Sworn and subscribed before me this 30<sup>th</sup> day of June, 2023

Amy D. Woodard

My Commission Expires: 4/29/24



SCHEDULE A - INDIVIDUAL'S PERSONAL HISTORY



09J061-06L356

Application filled by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

I submit answers to the following questions under oath:

1. Name Wes Lunsford Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_
2. Home Address 2118 Kirby Rd. Memphis 38119 Phone No. 901-289-2664  
 Street City Zip
3. Are you a person of good moral character and reputation in your community? Yes
4. Are you a (CITIZEN) or (PERMANENT RESIDENT ALIEN) of the United States? CIRCLE ONE  
 Social Security No. \_\_\_\_\_ Green Card No. \_\_\_\_\_
5. Are you a resident of the county in which application has been made? NO  
 If not, do you live within 35 miles of the premises to be permitted? NO
6. Have you ever been convicted of a felony? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

7. Have you been convicted of any violation of any law relating to alcoholic beverages within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

8. Have you had any alcoholic beverage permit issued to you revoked within the five (5) years preceding this application? YES \_\_\_\_\_ NO X If so, give full information \_\_\_\_\_

9. Do you presently hold or have you ever held an alcoholic beverage permit(s)? YES If so, give name, place, and permit number(s)  
MALCO Hollywood, Jonesboro, # 06159

10. Have you applied and been refused a permit at the applied for location within the last 12 months? NO If so, give full information \_\_\_\_\_

11. Marital Status: Single ( ) Married (X) Divorced ( ) Separated ( ) Other ( )

12. Furnish complete information regarding members of immediate family:

Relationship	Full Name	Address	Occupation
Wife	Ashley Lunsford	2118 Kirby Rd, Memphis	NONE
Daughter	DVA Lunsford	2118 Kirby Rd	NONE
Daughter	Sophia Lunsford	2118 Kirby Rd	NONE



(a) Are any of the above to be connected with the operation of the outlet? Yes

(b) If so, who and in what capacity? owner

13. Give your home address (city or town) and dates at each for the past five (5) years:

2118 Kirby Rd Memphis TN 38119 2/14/17- Present

6388 Kirby Rd Memphis TN 38119 6/9/14- Present

14. Covering the past five (5) years, give in detail the following:

<u>Your Business or Occupation</u>	<u>Name &amp; Address of Employer</u>	<u>Dates of Employment</u>
<u>MALCO</u>	<u>MALCO Theatres</u>	<u>Nov 2008-</u>
	<u>5851 Ridgeway Ctr</u>	<u>Present</u>
	<u>Parway Memphis TN</u>	

I hereby state on oath that I will not violate any law of this State or any regulation of the Alcoholic Beverage Control Division, nor will any agent or employee be allowed to violate any law or regulation. It is hereby consented that the licensed premises and its books and records shall be open at all times to all law enforcement officials without warrant or other legal process.

[Signature]  
Applicant's Signature

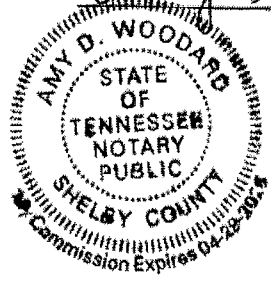
TENNESSEE  
STATE OF ARKANSAS  
COUNTY OF SHELBY

Wes Lunsford, being first duly sworn on oath deposes and says that he/she has read each of the questions to which he/she has made answer, and that his/her said answers in each instance are true and correct.

Subscribed and sworn to before me this 17th day of July, 2023

My Commission Expires: 4/29/2026

Amy D. Woodard  
Notary Public







AUTHORITY TO RELEASE INFORMATION

Application filed by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

[Signature]  
Signature - Full Name

7/17/23  
Date

2118 Kirby Rd  
Home Address

Memphis TN 38119  
City State Zip

2118 Kirby Rd  
Mailing Address

Memphis TN 38119  
City State Zip

901-289-2664 901-289-2664  
Contact Phone Business Phone

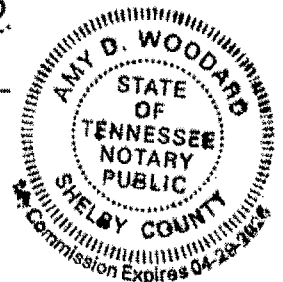
wes.lunstford@malco.com  
E-Mail Address

Sworn and subscribed before me this 17<sup>th</sup> day of July, 2023.

Amy D. Woodard  
Notary Public

My Commission Expires: 4/29/2026

(Revised 3/08)



SCHEDULE A - INDIVIDUAL'S PERSONAL HISTORY



DS-2025-01-01

Application filled by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

I submit answers to the following questions under oath:

- 1. Name DAVID TASHIE Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_
- 2. Home Address 266 E. Cherry Circle Memphis 38117 Phone No. 901-299-9012  
Street City Zip
- 3. Are you a person of good moral character and reputation in your community? Yes
- 4. Are you a (CITIZEN) or (PERMANENT RESIDENT ALIEN) of the United States? **CIRCLE ONE**  
Social Security No. \_\_\_\_\_ Green Card No. \_\_\_\_\_
- 5. Are you a resident of the county in which application has been made? NO  
If not, do you live within 35 miles of the premises to be permitted? NO
- 6. Have you ever been convicted of a felony? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_

7. Have you been convicted of any violation of any law relating to alcoholic beverages within the five (5) years preceeding this application? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_

8. Have you had any alcoholic beverage permit issued to you revoked within the five (5) years preceeding this application? YES \_\_\_\_\_ NO  If so, give full information \_\_\_\_\_

9. Do you presently hold or have you ever held an alcoholic beverage permit(s)? Yes If so, give name, place, and permit number(s)  
MALCO HOLLYWOOD, Jonesboro, MO 6459 → MALCO RAZORBACK, Fayetteville, AR 72708.  
MALCO Springdale, Springdale, AR #04466-02 MALCO ROGERS - ROGERS, AR # 04791-02

10. Have you applied and been refused a permit at the applied for location within the last 12 months? NO If so, give full information \_\_\_\_\_

11. Marital Status: Single ( ) Married  Divorced ( ) Separated ( ) Other ( )

12. Furnish complete information regarding members of immediate family:

Relationship	Full Name	Address	Occupation
Spouse	Christi Tashie	266 E. Cherry Circle	None



\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(a) Are any of the above to be connected with the operation of the outlet? NO

(b) If so, who and in what capacity? \_\_\_\_\_

13. Give your home address (city or town) and dates at each for the past five (5) years:

266 E. Cherry Circle Memphis TN 38117

14. Covering the past five (5) years, give in detail the following:

Your Business or Occupation	Name & Address of Employer	Dates of Employment
<u>MALCO Theatres</u> <u>President</u>	<u>5851 Ridgeway Ctr</u> <u>Penway Memphis TN</u> <u>38120</u>	<u>1998 -</u> <u>Present</u>

I hereby state on oath that I will not violate any law of this State or any regulation of the Alcoholic Beverage Control Division, nor will any agent or employee be allowed to violate any law or regulation. It is hereby consented that the licensed premises and its books and records shall be open at all times to all law enforcement officials without warrant or other legal process.

[Signature]

Applicant's Signature

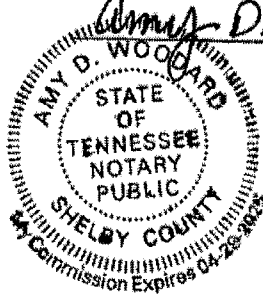
TENNESSEE  
STATE OF ARKANSAS  
COUNTY OF SHELBY

DAVID TASHIE, being first duly sworn on oath deposes and says that he/she has read each of the questions to which he/she has made answer, and that his/her said answers in each instance are true and correct.

Subscribed and sworn to before me this 14<sup>th</sup> day of July, 2023

My Commission Expires: 4/29/2024

Amy D. Woodard  
Notary Public





AUTHORITY TO RELEASE INFORMATION

Application filled by Applicant - A, Stockholder/Partner - S : \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

[Signature]  
Signature - Full Name

7/14/23  
Date

266 E. Cherry Circle  
Home Address

Memphis TN 38117  
City State Zip

851 Ridgeway Cir Pkvi  
Mailing Address

Memphis TN 38120  
City State Zip

901-761-3480  
Contact Phone Business Phone

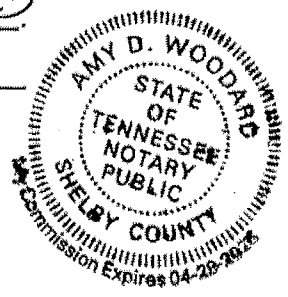
david.tashie@malco.com  
E-Mail Address

Sworn and subscribed before me this 14<sup>th</sup> day of July, 2023

Amy D. Woodward  
Notary Public

My Commission Expires: 4/29/2026

(Revised 3/08)



## IMPORTANT INFORMATION AND INSTRUCTIONS

### REGARDING A CRIMINAL BACKGROUND CHECK

1. Alcoholic Beverage Control laws and regulations prohibit the issuance of a permit to a person who has been convicted of a felony. This law also applies to partners, stockholders (persons who own more than 5% of the stock in a corporation) or members of an LLC who own more than 5% interest.
2. Attached is a criminal background application which must be completed and submitted to the Arkansas State Police. They will return the Arkansas background check results to you; ***the original document must accompany the City of Jonesboro application.*** If this report indicates you (partner, stockholder or member of LLC, if applicable) are not a convicted felon, your application will be eligible for consideration by the city. Amount of \$25.00 (check or money order) is due at time of submission to Arkansas State Police.

**A SELF ADDRESSED, STAMPED ENVELOPE MUST BE ENCLOSED WITH SUBMISSION OF THE ABOVE.**

4. If you wish to complete this process in person, go to the Arkansas State Police Headquarters. You will be required to show a state issued photo ID or driver's license. Payment must be by check or money order made payable to Arkansas State Police.

Background investigation questions; call Arkansas State Police at  
501 618 8500.

**MAIL TO:** Arkansas State Police  
ATTN: Identification Bureau  
#1 State Police Plaza  
Little Rock, Arkansas 72209

**AUTHORITY TO RELEASE INFORMATION**

Application filed by Applicant -A, Stockholder/Partner - S: \_\_\_\_\_

TO WHOM IT MAY CONCERN:

I understand that the City of Jonesboro will conduct an investigation before a final decision this alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the City of Jonesboro.

Jeff Ayers  
Signature - Full Name

08/07/2023  
Date

916 Oriole Dr  
Home Address

Jonesboro AR 72405  
City State Zip

same  
Mailing Address

901-412-6669 870-910-5000  
Contact Phone Business Phone

Jeff.Ayers@malco.com  
Email Address

Subscribed and sworn to before me this 7 day of August, 2023.

Ali Gammall  
Notary Public

My Commission Expires: March 21, 2032

ALI GOMOLL  
CRAIGHEAD COUNTY  
NOTARY PUBLIC - ARKANSAS  
My Commission Expires March 21, 2032  
Commission No. 12718479

Application for Criminal History Check  
for Alcoholic Beverage Permit  
A.C.A 3-2-103

(See other side for instructions)

Full Name: Ayers Jefferson Travis  
Last Name First Name Middle Name

All other names ever used (married names, maiden, shortened, etc)

Date of Birth: \_\_\_\_\_ State of Birth: TN Race: \_\_\_\_\_ Sex: \_\_\_\_\_  
Month / Day / Year

Social Security #: \_\_\_\_\_ Driver's License #: 9299 31674 AR  
State

Mailing Address: 916 Oriole Dr Jonesboro AR 72405  
Street City State ZIP

Day Time Phone: 901-412-6669

I GIVE MY CONSENT FOR THE ARKANSAS STATE POLICE TO CONDUCT A CRIMINAL RECORD SEARCH ON MYSELF AND  
RELEASE ANY RESULTS TO THE FOLLOWING PERSON AND / OR ENTITY :

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Full Name of Agency

Mailing Address: \_\_\_\_\_  
Street City State ZIP

Signature: [Signature] Date: 08/07/2023  
(First / MI / Last Name) (Month / Day / Year)

(NO REQUEST WILL BE PROCESSED WITHOUT A NOTARIZED SIGNATURE)

Subscribed and sworn to before me this 7 day of August, 2023.  
[Signature]  
Notary Public

My Commission Expires: March 21, 2032

ALLI GOMOLL  
CRAIGHEAD COUNTY  
NOTARY PUBLIC - ARKANSAS  
My Commission Expires March 21, 2032  
Commission No. 12718479

First Name	Last Name	Address	City	State	Zip
Wynette	Husich	1815 Ellen Drive	Jonesboro	AR	72404
Sam	Montgomery	702 CR 730	Jonesboro	AR	72401
Cary	Gube	6 Martin Street	Ash Flat	AR	72513
Hannah	Wheeler	974 Highway 18	Tyronza	AR	72386
Zach	Huttman	106 Olive Street	Pocahontas	AR	72455
Virginia	Langford	2419 St John Ave	Dyersburg	TN	38024
Robert	Lengfer	523 Plaza	Truman	AR	72472
Anna Claire	Mitchell	94 CR 398	Bono	AR	72416
Desiree	Orosz	910 Oriole Drive	Jonesboro	AR	72401
Jennifer	Morales	406 W. Forrest	Jonesboro	AR	72401
Adriana	Burton	1803 Dodd Drive	Wynne	AR	72396
Matt	Woodson	221 W. Montgomery Street	Walnut Ridge	AR	72467
Chance	Curtner	938 E Craighead Forrest Road	Jonesboro	AR	72404
Amanda	Brown	843 CR 361	Bono	AR	72416
Chris	Derber	603 CR 354	Wynne	AR	72396
Beverly	McQuey	6761 Highway 49 N	Brookland	AR	72417
Dominique	Taylor	607 Gladiolus Drive Apt G12	Jonesboro	AR	72404
Jim	Grambling	2500 Alexander Drive	Jonesboro	AR	72401
Kate	Cut	PO Box 2734	Batesville	AR	72503
Mark	Bishop	1600 E Johnson Ave #1	Jonesboro	AR	72401
Teauge	Dillon	PO Box 584	Newport	AR	72112
Charles	Holt	3938 Highway 1	Cherry Valley	AR	72324
Hunter	Whitehurst	640 CR 390	Jonesboro	AR	72401
Alissa	Reynolds	5003 Brac Place	Jonesboro	AR	72404
Andrew	Esquivas	3208 Casey Spring Road	Jonesboro	AR	72404
Alisa	Spence	207 C South Church	Jonesboro	AR	72401
Lindsey	Bowers	4605 Peter Trail	Jonesboro	AR	72401
Henry	Lavender	2009 Indian Trails	Jonesboro	AR	72401
Christian	Lavender	500 N Crraway	Jonesboro	AR	72401
Shaun	Scoggins	2704 Wakefield Drive	Jonesboro	AR	72401
Karri	Fuller	6420 Pinall Drive	Horn Lake	AR	38637
Jason	Kundit	4206 Aggie Road	Jonesboro	AR	72401
Lee	Aurther	909 Wagner	Jonesboro	AR	72401
Greg	Mithell	4129 Covington	Jonesboro	AR	72401
Sean	Ledford	6065 Stonebridge	Jonesboro	AR	72401
Sandy	Woodard	4125 Stephanie Lane	Jonesboro	AR	72401
Mike	DeLoache	512 West Washington	Jonesboro	AR	72401
Mariano	Meza	2403 Glenn Place	Jonesboro	AR	72404
Jeanette	Rolusa	3209 Springwood	Jonesboro	AR	72404
Karen	Sanders	5411 Khakis Place	Jonesboro	AR	72404
Brianne	Schrader	18058 Daisy Road	Harrisburg	AR	72432
Allison	Rogers	3103 Case Street	Paragould	AR	72450
Dalton	Romero	736 Country Charm Road	Mountain View	AR	72560
Mindy	Davis	83 CR 7820	Jonesboro	AR	72401
Kinsley	Smith	37714 Abbott Road	LePanto	AR	72354
Leane	Meadors	2502 Cherry Crossing	Benton	AR	72015
Rebecca	Russell	310 SW Case	Hoxie	AR	72433
Logan	Akers	2102 Tanglewood Drive	Jonesboro	AR	72401



Tracy	Caskey	3700 S Caraway Road C3	Jonesboro	AR	72404
Andrea	Buford	500 N Caraway Road #711	Jonesboro	AR	72401
Carter	Winter	1006 N 1520 E	Sandy	UT	84092
Lynne	Celt	24 Lawrence Road #226	Powhatan	AR	72458
Stacey	Orr	1803 Woodspoint Cove	Jonesboro	AR	72401
Rachel	Thornton	5713 Ridgeview Drive	Jonesboro	AR	72404
Germia	Griffin	4485 Ridgeway Road	Memphis	TN	38116
Anthony	Watson	449 Shofner Drive	Memphis	TN	38109
Kena	Smith	800 Bridges Ave	Wynne	AR	72396
Lageillsma	Harris	906 Bridges Ave	Wynne	AR	72396
Hannah	Hefner	7921 NE San Rafael Drive	Kansas City	MO	64119
Sutton	Gadberry	107 Circle M Road	Searcy	AR	72143
Beau	Jones	3800 Ridgepoint Cove	Jonesboro	AR	72404
Joey	Rubino	4421 Lochmoor Circle	Jonesboro	AR	72401
Leph	Sullivan	186 Greene Road	Paragould	AR	72450
Shannon	Wess	108 E Jackson Street	Harrisburg	AR	72432
Lindsey	Carter	1016 McGowan #214	Little Rock	AR	72202
Erica	Jennings	166 Sundown Lane	Jonesboro	AR	72401
Ryleigh	Snow	27 Snow Lane	Jonesboro	AR	72401
Morgan	Simpson	4006 Brandywine Drive	Jonesboro	AR	72404
Goer	Byrd	22696 Pineview Road	Truman	AR	72472
Pam	Loop	16050 Ruhill	Jonesboro	AR	72401
Cety	Hall	125 Oak Meadow Circle	Brookland	AR	72417
Jason	Qualls	157 Lawrence Rd #316	Strawberry	AR	72469
Doe	Correa	2408 Mary Jane Drive	Jonesboro	AR	72401
Jerry	Coleman	5524 Kersey Lane	Jonesboro	AR	72404
Justin	Mitchell	126 Kristy Lane	Osceola	AR	72370
Vernita	McDaffy	1348 Medallion Drive	Jonesboro	AR	72404
April	Allison	15119 Medallion Court #3	Jonesboro	AR	72404
Brady	Collins	8311 Highway 163	Harrisburg	AR	72432
Mary	Thatcher	407 Eagle	Newport	AR	72112
Christine	Jarrett	1456 Highway 42	Hickory Ridge	AR	72347
Jackie	Oconnor	PO Box 286	Hoxie	AR	72433
Kylie	Crosskno	367 E CR346	Blytheville	AR	72315
Kimberly	Moseley	570 Wilkins Ave	Jonesboro	AR	72401
Jordon	Jernisa	20558 Highway 158	Harrisburg	AR	72432
Joey	Jace	110 S 18th Ave	Paragould	AR	72450
Katherine	Smith	196 CR 157	Cash	AR	72421
Millie	Camp	41 Enclave	Paragould	AR	72450
Erin	Brown	501 Ridgecrest Street	Jonesboro	AR	72401
Cameron	Robinson	2002 Timberridge Drive	Jonesboro	AR	72401
Heather	Ceddward	4623 Bedrock	Jonesboro	AR	72404
Tonya	Jolley	1003 LeVesque Ave	Wynne	AR	72396
Ranea	Lambert	1609 Airport	Jonesboro	AR	72401
Brenda	Phillips	1905 Old Bridge Road	Jonesboro	AR	72401
James	Woods	23251 Big Road	Harrisburg	AR	72432
Michelle	Johnson	PO Box 16315	Jonesboro	AR	72403
Jason	Winemiller	4503 Highway 63	Black Rock	AR	72415
Amanda	Brayar	639 South Street	Weiner	AR	72479

Cass	Taylor	105 Walton	Black Oak	AR	72414
Devin	Holder	2701 Freedom Drive	Jonesboro	AR	72401
Lynn	Cook	113 Grove Drive	Jonesboro	AR	72401
Michael	Hall	118 Hayden Street	Bono	AR	72416
Shebbie	Leonard	239 Highway 63	Ravenden	AR	72459
Ethan	Latjer	500 N Crraway #624B	Jonesboro	AR	72401
Hannah	Hoit	906 Markle Street	Jonesboro	AR	72401
Tyler	Hembree	586 Lawrence Road 620	Walnut Ridge	AR	72476
Ben	Moyer	403 Jill Drive	Jonesboro	AR	72404
Chris	Thigpen	1101 Paragould Drive	Jonesboro	AR	72401
Kim	Best	2218 Addison Cove	Jonesboro	AR	72404
Thomas	Miller	95 Rush Lane	Imboden	AR	72434
Lois	Collier	3110 Bowden Drive	Jonesboro	AR	72404
Shelby	Hensley	600 McNatt Drive	Brookland	AR	72417
Morgan	Harrison	600 McNatt Drive	Brookland	AR	72417
Brittany	Paul	3108 Sistine Chapel Circle	Jonesboro	AR	72404
Rachel	Columbus	500 N Caraway Road	Jonesboro	AR	72401
William	Dacus	2904 Beanie	Jonesboro	AR	72401
Richard	Griggs	4660 Wilmoth Drive	Etowah	AR	72428
Chad	Robinson	1305 Darlene Cove	Jonesboro	AR	72401
Paige	Robinson	210 Pekin Street	Jonesboro	AR	72401
Keri	Lowe	4315 Prospect Lot #10	Jonesboro	AR	72401
Anne	Johnson	2007 Bunker Hill	Jonesboro	AR	72401
Geri	Lambert	45 Highway 139 S.	Monette	AR	72447
Matt	Beegle	2809 Ridgmont Road	Jonesboro	AR	72401
Debbie	Alexander	2014 Wingate Drive	Jonesboro	AR	72404
Cheri	Wallace	16250 Highway 163	Harrisburg	AR	72432
Stacy	Phillips	3719 Stadium Boulevard	Jonesboro	AR	72404
Suzette	Baker	PO Box 156	Paragould	AR	72451
Tyler	Garnett	5413 Clear Creek Lane	Jonesboro	AR	72404
London	Horton	1912 Stevens Road	Rockwall	TX	75032
Bill	Prestiose	1814 Peggy Drive	Jonesboro	AR	72401
Katherine	Burns	524 West Oak Avenue	Jonesboro	AR	72401
Aaron	Mitchell	3700 South Caraway Road	Jonesboro	AR	72401
Chrissie	Grif	5091 ECR 132	Blytheville	AR	72315
Jenn	Rogers	800 Sherwood Oaks Lane	Jonesboro	AR	72404
Daniel	Carmichael	310 Allen Street	Black Oak	AR	72414
Austin	Zamura	4004 Cornerstone Drive	Jonesboro	AR	72401
Kelsey	Garland	904 Johnson Avenue	Lake City	AR	72437
Barbara	Wagner	2778 Highway 228	Walnut Ridge	AR	72476
Jamie	Stahl	3000 Bermuda Drive	Jonesboro	AR	72401
Jeremy	Brown	250 CR 855	Caraway	AR	72419
Kimberly	Rogers	2506 West Acers Drive	Jonesboro	AR	72401
Jonathan	Wickers	5380 Highway 358	Paragould	AR	72450
Adrianna	Walker	409 CR505	Rector	AR	72461
Michael	Williams	1019 South Culberhouse Street	Jonesboro	AR	72401
Tabatha	Smith	8068 Highway 163 North	Harrisburg	AR	72432
Courtney	Garner	695 CR 620	Jonesboro	AR	72404
Natalie	Carter	1211 Country Club Terrace	Jonesboro	AR	72401

Jennifer	Jarrett	2304 Sanctuary Circle	Jonesboro	AR	72404
Ben	Duckos	1112 Links Drive #6	Jonesboro	AR	72404
Lindsey	Driver	1204 Dillon Drive	Truman	AR	72472
Bridget	Calaway	4300 Lynnfield Road	Jonesboro	AR	72404
Lauren	Meeks	2003 Hospital Drive	Pocahontas	AR	72455
Kaitlin	Shipley	86 CR 418	Jonesboro	AR	72404
Lacey	Baugh	177 CR 309	Jonesboro	AR	72401
Jaysheena	Chadek	1751 West Nettleton Avenue #103D	Jonesboro	AR	72401
Ariel	Qualls	509 West Forrest Street	Jonesboro	AR	72401
Nathaniel	Armstrong	1622 North Patrick Street	Jonesboro	AR	72401
Dillon	Jones	4974 EC Rd 186	Blytheville	AR	72319